


**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004**

DOCUMENT # A95000000957		
1. Entity Name AMERICAN LAND HOUSING GROUP, LTD.		
Principal Place of Business 115 NW 167 ST. #300 NORTH MIAMI BEACH, FL 33169		Mailing Address 115 NW 167 ST. #300 NORTH MIAMI BEACH, FL 33169
2. Principal Office One SE 3rd Avenue Suite 3100 Miami, FL 33131	3. Office One SE 3rd Avenue Suite 3100 Miami, FL 33131	
4. FEI Number 65-0588222	Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	

FILED

04 APR 30 PM 12: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



MOORE CR2E003 (11/03)

6. Name and Address of Current Registered Agent AMERICAN LAND HOUSING GROUP, INC. 1 N One SE 3rd Avenue L 33169 Suite 3100 Miami, FL 33131		7. Name and Address of New Registered Agent Name Street A (acceptable) One SE 3rd Avenue Suite 3100 City Miami, FL 33131 FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE _____	

9. Capital Contributions as Shown on record. \$5,080,953.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P95000043485 AMERICAN LAND HOUSING GROUP, INC. 115 NW 167 ST. #300 NORTH MIAMI BEACH FL 33169	STREET ADDRESS CITY-ST-ZIP	One SE 3rd Avenue Suite 3100 Miami, FL 33131
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	<i>[Signature]</i>

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *[Signature]* **GRANT TERRY** **4/27/04** **305 654-1500**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #