## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 8, 2004

KELLY, CHARLES M JR. 2640 GOLDEN GATE PKWY. STE. 315 NAPLES, FL 34105-3203  8. The above named entity submits the obligations of registered agent the obligations of registered agent signature, speed or printed name of the obligations of registered agent signature, speed or printed name of the obligations of registered agent signature, speed or printed name of the obligations of registered agent signature, speed or printed name of the obligations of registered agent signature, speed or printed name of the obligations of registered agent signature, speed or printed name of the obligations of registered agent signature, speed or printed name of the obligations of registered name of the obligations of registered name of the obligations of the obligation obligation of the obligation of the obligation obligation of the obligation obli	5000001153 D PARTNERSHIP		FILED
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip	Mailing Address		2004 JUN -8 ₱ 3: 2:
Suite, Apt. #, etc.  City & State  Zip	715 WILLOWWOOD LANE NAPLES, FL 34108		SECRETARY OF STATE
City & State  Zip Country  6. Name and Addre  KELLY, CHARLES M JR. 2640 GOLDEN GATE PKWY. STE. 315  NAPLES, FL 34105-3203  8. The above named entity submits the obligations of registered agent  SIGNATURE Signature, typed or printed name  9. Capital Contributions as Shown on record.  12. GENT  DOCUMENT!  NAME SIREET ADDRESS CITY-ST-ZIP  DOCUMENT!  NAME STREET ADDRESS CITY-	3. Mailing Address		
6. Name and Addre  KELLY, CHARLES M JR. 2640 GOLDEN GATE PKWY. STE. 315 NAPLES, FL 34105-3203  8. The above named entity submits the obligations of registered agent the obligations of registered agent says as Shown on record.  9. Capital Contributions as Shown on record.  12. GENERAL NOTE: General 12. GENERAL NOTE: General 12. GENERAL NOTE: GENERAL N	Suite, Apt. #, etc.		05242004 Chg-LP CR2E003 (10/03)
6. Name and Addre  KELLY, CHARLES M JR. 2640 GOLDEN GATE PKWY. STE. 315 NAPLES, FL 34105-3203  8. The above named entity submits the obligations of registered agent the obligations of registered agent says and the obligations of registered agent	City & State		4. FEI Number Applied For 65-0600056 Not Applicable
KELLY, CHARLES M JR. 2640 GOLDEN GATE PKWY. STE. 315 NAPLES, FL 34105-3203  8. The above named entity submits the obligations of registered agent the obligations of registered agent says and the oblighted says and the obligations of registered agent says and the obligations of registered ag	ÿ Zip "C	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
2640 GOLDEN GATE PKWY. STE. 315 NAPLES, FL 34105-3203  8. The above named entity submits the obligations of registered agent the obligations of registered agent says as shown on record.  9. Capital Contributions as Shown on record.  12. GENERAL NOTE: General STREET ADDRESS (17Y-ST-ZIP NAPLES, FL 34108)  DOCUMENT / NAME BISANZ, LEONARD (17Y-ST-ZIP NAPLES, FL 34108)  DOCUMENT / NAME STREET ADDRESS (17Y-ST-ZIP D	ress of Current Registered Agent	h1	7. Name and Address of New Registered Agent
8. The above named entity submits the obligations of registered agent SIGNATURE  Signature, typed or printed name as Shown on record.  9. Capital Contributions as Shown on record.  12. GENE  DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP P4. I hereby certify that the informatic	Υ.	Street Address (I	P.O. Box Number is Not Acceptable)
the obligations of registered agent  SIGNATURE Signature, typed or printed name  9. Capital Contributions as Shown on record.  12. GENE  DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP COCUMENT / NAME S		City	, <b>FL</b> Zip Code
9. Capital Contributions as Shown on record.  12. GENERAL NOTE: General  12. GENE  12. GENE  12. GENE  12. GENE  13. JEONARD  715 WILLOWWOOD  NAPLES, FL 34108  DOCUMENT / NAME  BISANZ, HELEN C  715 WILLOWWOOD  NAPLES, FL 34108  DOCUMENT / NAME  STREET ADDRESS  CITY-ST-ZIP  T4. I hereby certify that the informatic inclicated on this report is true and inclination and i		istered office or register	red agent, or both, in the State of Florida. I am familiar with, and accept
A GENERAL NOTE: General  12. GENE  DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS CI	me of registered agent and title if applicable.		, DATE
12. GENERAL  DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME BISANZ, LEONARD 715 WILLOWWOOD NAPLES, FL 34108  DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS CI	0,000.00 10. Amount of Capital Coin FLORIDA to date.	ontributions	
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NAME STREET ADDRESS CITY-ST-ZIP NAME BISANZ, LEONARD 715 WILLOWWOOD NAPLES, FL 34108  BISANZ, HELEN C 715 WILLOWWOOD NAPLES, FL 34108  BISANZ, HELEN C 715 WILLOWWOOD NAPLES, FL 34108  DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	NERAL PARTNER INFORMATION	13.	ADDRESS CHANGES ONLY
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indicated on this report is true an		CITY-ST-ZIP	110 07/0V3 Fleide Canada II de a constante de la constante de
The receiver or trustee empowere	tion supplied with this filing does not qualify for the and accurate and that my signature shall have the red to execute this report as required by Chapter 6	same legal effect as if re	ection 119.07(3)(i), Florida Statutes. I further certify that the information nade under oath; that I am a General Partner of the limited partnership or
SIGNATURE: Liles	N C. Busany ATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL P.	<u>J</u>	m2, 2004 651-695-03