2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 8, 2004

SIGNATURE:

FILED **DOCUMENT # A96000001459** 04 JUL 21 AM 11:08 MICHAEL BOWLING ENTERPRISES LIMITED #I SERVE TARY OF STATE TALLAMASSEE FLORIDA MJH : Mailing Address Principal Place of Business 503 CENTRE STREET **503 CENTRE STREET** FERNANDINA BEACH, FL 32034 FERNANDINA BEACH, FL 32034 3. Mailing Address 2. Principal Place of Business 2420 LYNNDALE RD 2420 LYNNDALE RD Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E003 (10/03) 07062004 Chg-LP City & State City & State 4. FEI Number Applied BEACH FL FERNANDINA BEACH FL 59-3396163 FERNANDINA Not Applicable Country Zip Country Zip 32034 \$8.75 Additional 5. Certificate of Status Desired IY ASSA U 32034 N ASSAU Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name YONG, FRANK J ESQUIRE Street Address (P.O. Box Number is Not Acceptable) 1050 RIVERSIDE AVENUE JACKSONVILLE, FL 32201 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions \$10,000.00 in FLORIDA to date. as Shown on record. 10,000.00 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. P96000062108 7.Name n**4** msemdo7\$en 2420 LYNNDALE ROAD J.M.B. TOY DEVELOPMENT, INC. 503 CENTRE STREET rnseendo 75 err Nfn@mRufi FERNANDINA BEACH FL 32034 FERNANDINA BEACH, FL 32034 Nfn@m/krfi 7.Name nd rnseendo79er ome -500039951025 08/06/04--01047--021 **\$\$8.75 rnseendo/serr Nfn@nPgfi Nintmilati 7.Name nd msendo7977 rnseendo79en Nfn@nftifl Nfo@mPafi 7.Name na ome msendo79en Nfn@nPufi NtownRuft 7.Name n**≜** mseedo7far mseendo75tr Nfn@mPafi NfnWmPgfl 7.Name nd mseedo78ar ome . mser do78en NfownRafi Nfnfil vPgfi 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

STAN SIKORSKI UP

JMB TOYDELLE LOP INC 07/4/04 GENERAL PRITIER 07/4/04