

# 2004 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000001125

FILED  
Apr 26, 2004  
Secretary of State

**Entity Name:** JENE'S RETIREMENT INVESTORS, LTD.

**Current Principal Place of Business:**

6865 N. LINCOLN AVE.  
LINCOLNWOOD, IL 60712

**New Principal Place of Business:**

**Current Mailing Address:**

C/O NORMAN GINSPARG  
3389 SHERIDAN ST., #195  
HOLLYWOOD, FL 33021

**New Mailing Address:**

FEI Number: 65-0920415      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GINSPARGN, NORMAN  
11190 BISCAYNE BLVD.  
NORTH MIAMI, FL 33181      US

**Name and Address of New Registered Agent:**

GINSPARG, NORMAN J  
12221 WEST DIXIE HIGHWAY  
NORTH MIAMI, FL 33161      US

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.

SIGNATURE: NORMAN J GINSPARG      04/26/2004  
Electronic Signature of Registered Agent      Date

**Capital Contributions as Shown on record:** 550,000.00  
**Amount of Capital Contributions in Florida to date:** 550,000.00

**GENERAL PARTNER INFORMATION:**

Document #:  
Name: JENE'S RETIREMENT LIVING, INC.  
Address: 11190 BISCAYNE BLVD.  
City-St-Zip: N. MIAMI, FL 33181

**ADDRESS CHANGES ONLY:**

Address: 1595 NE 145 ST  
City-St-Zip: N. MIAMI, FL 33161

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: PHILIP ESFORMES      P      04/26/2004  
Electronic Signature of Signing General Partner      Date