

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

FILED
Mar 08, 2004 08:00 AM
Secretary of State

DOCUMENT # A98000001537	
1. Entity Name CLEVELAND PLAZA, LTD.	

Principal Place of Business 1213 CLEVELAND STREET CLEARWATER FL 33755	Mailing Address 1213 CLEVELAND STREET CLEARWATER FL 33755
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



MOORE CR2E003 (11/03)

4. FEI Number 59-3518352	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WILKINS, MARK H 1213 CLEVELAND ST. CLEARWATER FL 33755	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ **DATE** _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$352,950.00	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 #	P98000054597	STREET ADDRESS	000000001047
NAME	WILKINS CORP.	CITY-ST-ZIP	03/03/01 00001 001 000.00
STREET ADDRESS	2778 QUAIL HOLLOW ROAD WEST	STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL 33761	CITY-ST-ZIP	
DOCUMENT #	P98000054589	STREET ADDRESS	
NAME	VOGEL CORP.	CITY-ST-ZIP	
STREET ADDRESS	2209 RIVERVIEW BLVD. WEST	STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34205	CITY-ST-ZIP	
DOCUMENT #	P95000022389	STREET ADDRESS	
NAME	CONPROP OF TAMPA, INC.	CITY-ST-ZIP	
STREET ADDRESS	6807 BLUFFS BLVD.	STREET ADDRESS	
CITY-ST-ZIP	TEMPLE TERRACE FL 33617	CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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: WILKINS, CORP.
Mark Wilkins Mark Wilkins, President 2-17-04 (727) 447-7330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE