

LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

ENT # A99000001856

FLP, LTD.



FILED

04 FEB 12 AM 9:05

SECRETARY OF STATE
TALLAHASSEE FLORIDA

001000



01052004 Chg-LP CR2E003 (10/03) 2/12

Principal Place of Business 5401 HANGAR COURT TAMPA, FL 33634		Mailing Address 5401 HANGAR COURT TAMPA, FL 33634	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-3607618		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent FRANZBLAU, ROBERT M 5401 HANGAR COURT TAMPA, FL 33634		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. \$20,000,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$9,000	\$151.75
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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 #	FRANZBLAU, ROBERT M	STREET ADDRESS	
NAME	5401 HANGAR COURT	CITY-STATE-ZIP	200029740282
STREET ADDRESS	TAMPA, FL 33634		03/03/04--01005--002 **151.75
CITY-STATE-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-STATE-ZIP	
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STREET ADDRESS			
CITY-STATE-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: 2/10/04 (813) 884-6344
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE