

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

APPROVAL
AND
FILED

04 APR 29 AM 11:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # B00000000046	
1. Entity Name STP ASSOCIATES I LIMITED PARTNERSHIP	

Principal Place of Business 4651 SHERIDAN STREET STE 200 HOLLYWOOD, FL 33021	Mailing Address 4651 SHERIDAN STREET STE 200 HOLLYWOOD, FL 33021
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2. Principal Place of Business 3390 Mary Street Suite, Apt. #, etc. Suite 200 City & State Coconut Grove, Florida Zip 33133	Country USA	3. Mailing Address 321 East Hillsboro Blvd. Suite, Apt. #, etc. City & State Deerfield Beach, Florida Zip 33441	Country USA
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03292004 Chg-LP CR2E003 (10/03)

4. FEI Number 52-2219295	Applied For Not Applicable
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5. Certificate of Status Desired XXX	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent STOTZER, THEODORE R 321 EAST HILLSBORO BLVD. C/O SWERDLOW BOCA DEVELOPERS GROUP DEERFIELD BEACH, FL 33441	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.

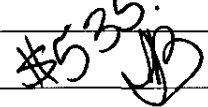
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable.	DATE _____
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9. Capital Contributions as Shown on record. \$28,729,574.03	10. Amount of Capital Contributions in FLORIDA to date. \$28,798,819.03
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A 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.

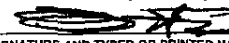
12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	F00000001008 SREG (STP) INC 4651 SHERIDAN STREET HOLLYWOOD, FL 33021	STREET ADDRESS CITY-ST-ZIP	3390 Mary Street, Suite 200 Coconut Grove, Florida 33133
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000034682200
 04/29/04--01033--012 **1019.75

\$535.00


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

STP ASSOCIATES I LIMITED PARTNERSHIP
 BY: SREG (STP), INC., its general partner

SIGNATURE: By: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
 Theodore R. Stotzer, Executive Vice President

April 15, 2004 (954) 949-3480
 Date Daytime Phone #

STAPLE CHECK HERE