

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
May 06, 2004 08:00 AM
Secretary of State

DOCUMENT # B99000000265	
1. Entity Name SRK VIERA ASSOCIATES L.P. Benchmark Greens et Viera Associates LP	



Principal Place of Business 4053 MAPLE ROAD AMHERST, NY 14226	Mailing Address 4053 MAPLE ROAD AMHERST, NY 14226
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc		Suite, Apt. #, etc	
City & State		City & State	
Zip	Country	Zip	Country



04232004 Chg-LP CR2E003 (10/03)

4. FEI Number 38-3366031	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL 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 _____ Signature, typed or printed name of registered agent and title if applicable	DATE _____
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9. Capital Contributions as Shown on record. \$305,000.00	10. Amount of Capital Contributions in FLORIDA to date. 305 000
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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 #	F99000003473	STREET ADDRESS	
NAME	BENCHMARK VIERA PROPERTIES, INC.	CITY - ST - ZIP	
STREET ADDRESS	4053 MAPLE ROAD		
CITY - ST - ZIP	AMHERST, NY 14226		
DOCUMENT #		STREET ADDRESS	U00000159988
NAME		CITY - ST - ZIP	05/13/04-80003-018 526.25
STREET ADDRESS			
CITY - ST - ZIP			
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STREET ADDRESS			
CITY - ST - ZIP			

STAPLE CHECK HERE

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: <u>Steven Long VP</u>	Date: <u>4/28/04</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	