


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

FILED
Apr 14, 2004 08:00 AM
Secretary of State

DOCUMENT # A98000001843	
1. Entity Name ALLAPATTAH GARDENS, LTD.	

Principal Place of Business 2950 S.W. 27TH AVENUE, SUITE 200 COCONUT GROVE FL 33133	Mailing Address 2950 S.W. 27TH AVENUE, SUITE 200 COCONUT GROVE FL 33133
--	--

2. Principal Place of Business	3. Mailing Address
---------------------------------------	---------------------------

Suite, Apt. #, etc.	Suite, Apt. #, etc.
---------------------	---------------------

City & State	City & State
--------------	--------------

Zip	Country	Zip	Country
-----	---------	-----	---------



MOORE CR2E003 (11/03)

4. FEI Number 65-0852731	Applied For <input type="checkbox"/> Not Applicable
------------------------------------	---

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
--	---------------------------------------

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
--	--

MCDONOUGH, BRIAN J 2200 MUSEUM TOWER 150 WEST FLAGLER STREET MIAMI FL 33130	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 <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE
--	-------------

9. Capital Contributions as Shown on record. \$3,472,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
---	---	---

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 # P02000093120 NAME NCDG ALLAPATTAH GARDENS, INC. STREET ADDRESS 5400 N.W. 22ND AVENUE, SUITE 705 CITY-ST-ZIP MIAMI FL 33142	STREET ADDRESS CITY-ST-ZIP U000000120848 04/26/04-80025-007 528.25
--	---

DOCUMENT # P98000066569 NAME ALLAPATTAH GARDENS, INC. STREET ADDRESS 2937 S.W. 27TH AVENUE, SUITE 303 CITY-ST-ZIP MIAMI FL 33133	STREET ADDRESS CITY-ST-ZIP
---	---

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP
---	---

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP
---	---

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP
---	---

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS 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:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	Date	Daytime Phone #
---	-------------	------------------------

STAPLE CHECK HERE