



**FILED**  
**Apr 05, 2004 8:00 A.**  
**Secretary of State**

DOCUMENT # A03000000385						Apr 03, 2004 8:00 Secretary of State	
1. Entity Name MNP SALEM INVESTMENTS, LTD.							
Principal Place of Business 845 LILA STREET BARTOW, FL 33830		Mailing Address 845 LILA STREET BARTOW, FL 33830					
2. Principal Place of Business		3. Mailing Address		02142004 Chg-LP CR2E003 (10/03)			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 51-0451279			
City & State		City & State		Applied For Not Applicable			
Zip		Country		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			
SALEM, MARY G 845 LILA STREET BARTOW, FL 33830				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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>							
9. Capital Contributions as Shown on record. \$405,256.51		10. Amount of Capital Contributions in FLORIDA to date. 0		141.25			
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 #	MNP SALEM MANAGEMENT, LLC 845 LILA STREET BARTOW, FL 33830			STREET ADDRESS			
NAME				CITY-ST-ZIP			
STREET ADDRESS							
CITY-ST-ZIP							
DOCUMENT #				STREET ADDRESS	300032968343		
NAME				CITY-ST-ZIP	04/16/04--01046--022 **141.25		
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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 registered trust; that I have not previously been convicted of a crime as required by Chapter 620, Florida Statutes							
Mary G. Salem, Trustee, Mary G. Salem Revocable Trust, Manager, MNP Salem Investments, LLC, General Partner, MNP Salem Investments, Ltd. Mary G. Salem 3-30-04							