

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 APR 27 PM 3:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MJH



DOCUMENT # A00000000179

1. Entity Name:
MONROE MANOR INVESTMENTS, LTD.



Principal Place of Business Mailing Address
701 RIVERSIDE PARK PLACE **701 RIVERSIDE PARK PLACE**
STE. 110 **STE. 110**
JACKSONVILLE, FL 32204 **JACKSONVILLE, FL 32204**

2. Principal Place of Business 3. Mailing Address
700 ERNONA ST **700 ERNONA ST**
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
JACKSONVILLE FL **JACKSONVILLE FL**
Zip Country Zip Country
32205 **USA** **32205** **USA**

04192004 Chg-LP CR2E003 (10/03) **4/27**

4. FEI Number Applied For
59-3621458 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
YONG, FRANK J
701 RIVERSIDE PARK PLACE
STE. 110
JACKSONVILLE, FL 32204

7. Name and Address of New Registered Agent
Name: **LINDA G. HINSON**
Street Address (P.O. Box Number is Not Acceptable):
700 ERNONA ST
City: **JACKSONVILLE FL** Zip Code: **32205**

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: *Linda G. Hinson* **April 26, 2004** DATE

9. Capital Contributions as Shown on record. \$5,000,000.00 10. Amount of Capital Contributions in FLORIDA to date.

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 #	P00000007457	STREET ADDRESS	700 ERNONA ST
NAME	HINSON STONER, INC.	CITY-ST-ZIP	JACKSONVILLE FL 32205
STREET ADDRESS	701 RIVERSIDE PARK PLACE STE. 110	STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE, FL 32204	CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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05/12/04--01044--014 **526.25

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: *Linda G. Hinson* **4-26-04** **904-374-6339**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE