
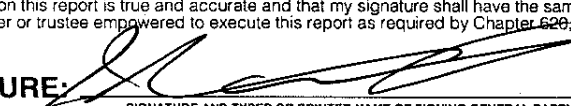


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
04 MAR 16 AM 8:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A00000000381					
1. Entity Name KENDALL COURT APARTMENTS, LTD.					
Principal Place of Business 11635 NW FIRST AVENUE GAINESVILLE, FL 32607			Mailing Address 11635 NW FIRST AVENUE GAINESVILLE, FL 32607		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01212004 Chg-LP CR2E003 (10/03)	
4. FEI Number 59-3629357				Applied For Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CURTIS, JOHN M 11635 NW FIRST AVENUE GAINESVILLE, FL 32607			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. \$50.00		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 #	NAME		STREET ADDRESS		
NAME	CURTIS, JOHN M		CITY-ST-ZIP		
STREET ADDRESS	11635 NW FIRST AVENUE				
CITY-ST-ZIP	GAINESVILLE, FL 32607				
DOCUMENT #	NAME		STREET ADDRESS	400031851194	
NAME			CITY-ST-ZIP	04/06/04--01006--003 **150.00	
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NAME			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: 		John M. Curtis		General Partner 2/17/04 352-332-0838	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date		Daytime Phone #	