

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A00000000720

1. Entity Name
MCVEIGH LIMITED PARTNERSHIP



FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

04 JAN 29 PM 4:18

Principal Place of Business C/O MARY ANNE LOSTAUNAU 14742 GLEN EDEN DRIVE NAPLES, FL 34110	Mailing Address C/O MARY ANNE LOSTAUNAU 14742 GLEN EDEN DRIVE NAPLES, FL 34110
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2. Principal Place of Business

3. Mailing Address

01212004 Chg-LP CR2E003 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-3645073

Applied For
 Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NAPLES-LAWDOCK, INC.
 QUARLES & BRADY LLP
 4501 TAMiami TRAIL NORTH SUITE 300
 NAPLES, FL 34103**

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

9. Capital Contributions as Shown on record. **\$2,815,000.00**

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 #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**SALMON, PATRICIA A TRUSTEE
 3019 CLIFFDALE RD.
 FAYETTEVILLE, NC 28303**

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**LOSTAUNAU, MARY ANNE TRUSTEE
 14742 GLEN EDEN DR.
 NAPLES, FL 34110**

STREET ADDRESS
 CITY-ST-ZIP

700027900987
01/29/04--01074--004 #526.25

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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 receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Mary Anne Lostaunau
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/21/04

Date

239-514-7385

Daytime Phone #