## 2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

SIGNATURE: Up no to the to or printed name of signing general partner

## FILED Apr 09, 2004 08:00 AM Secretary of State

DOCUMENT # A0000000927  1. Entity Name DESERT BEACH LIMITED PARTNERSHIP						Secret	ary of	State
Principal Place of Business Mailing Address				·				
979 BEACHLAND BLVD. 979 BEACHLAND BLVD. VERO BEACH, FL 32963 VERO BEACH, FL 32963								
Principal Place of Business     3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt # etc		01092004	Chg-LP	CR2E000	3 (10/03)	
City & State		City & State		4. FEI Number 65-1013			Applied For Not Applicable	
Zip	Country	Zip	Cour	ntry	1	I Status Desired	∪ Fe	8.75 Additional se Required
6. Name and Address of Current Registered Agent				Name	7. Name and Address of New Registered Agent			
FENNELL, TODD W 979 BEACHLAND BLVD.					iress (P.O. Box Number is Not Acceptable)			
VERO BEACH, FL 32963								
				City	City FL Zip Code			
B. 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								
S. 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. GÉÑĒRAL PARĪNER INFORMATION 13. ADDRESS CHANGES ONLY								
09CUMENT #				EET ADDRESS				
NAME STRLET ADDRECS	ISLAND CREEK, INC. 10RECS 979 BEACHLAND BLVD.				U00000114946			
CITY-ST-ZIP	12(10 02 10:11) 2 0200			Y-ST-ZIP	000000114946 04/16/04-80004-015 526.25			
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14. I hereby certify that the information supplied with this filling 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.								