2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

DOCUMENT # A00000000950 04 APR 30 AH 8: NL 1. Entity Name DONAHUE INVESTMENTS, LTD. SECRETARY OF STATE TALLAHASSEE, FLORIDA Mailing Address Principal Place of Business 5811 PELICAN BAY BLVD., STE. 600 C/O DONAHUE INVESTMENTS, INC. 3971 GULF SHORE BLVD., N., PH-201 NAPLES, FL 34103 NAPLES, FL 34108 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01202004 Chg-LP CR2E003 (10/03) Applied For City & State City & State 4. FEI Number 65-1033490 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FOWLER WHITE BOGGS BANKER FOWLER WHITE MYERS KRAUSE Street Address (P.O. Box Number is Not Acceptable) 5811 Pelican Bay Blvd., 5811 PELICAN BAY BLVD., STE. 600 NAPLES, FL 34108 Zip Code Naples 34108 ty 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 stered agent. FOWLER WHITE BOGG BANKER P.A. 8. The above named entry submits this stater the obligations of regis /JEANNE L. SEEWALD, ESQUIRE SIGNATURE d or printed name of registered agent and title it applicable 9. Capital Contributions 10. Amount of Capital Contributions \$10,000,000.00 as Shown on record. in FLORIDA to date. \$10,000,000.00 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. DOCUMENT # P00000056050 STREET ADDRESS DONAHUE INVESTMENTS, INC. NAME STREET ADDRESS 3971 GULF SHORE BLVD., N., PH-201 000036061180 CITY-5T-ZIP CITY-ST-ZIP NAPLES, FL 34103 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME" STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP STAPLE DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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 cath; that I am a General Partner of the limited partnership or the receiver or trustee employered to execute this report as required by Chapter 22. Florida Statutes SIGNATURE: NTED NAME OF SIGNING GENERAL PARTNER Davtime Phone # D. Joseph Donahue

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