2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2004

E CHECK

SIGNATURE:

Apr 14, 2004 08:00 AM Secretary of State DOCUMENT # A0000001600 1. Entity Name VCP-TIVOLI, LTD, Principal Place of Business Mailing Address 3020 HARTLEY ROAD, SUITE 300 JACKSONVILLE FL 32257 3020 HARTLEY ROAD, SUITE 300 JACKSONVILLE FL 32257 2. Principal Place of Business 3. Mailing Address Suite Ant # etc. Suite, Apt. #, etc. CR2E003 (11/03) City & State City & State 4. FEI Number Applied For 59-3677716 Not Applicable Zιp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FARRELL, MARK T 3020 HARTLEY ROAD, SUITE 300 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32257 City 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 Flonda. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, lyped or printed name of registered agent and title if applicable. 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$100,000,100.00 in FLORIDA to date. as Shown on record. SEE REVERSE SIDE FOR FEE INFORMATION 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 L00000012660 DOCUMENT # STREET ADDRESS NAME VCP-TIVOLI, LLC STREET ADDRESS 3020 HARTLEY ROAD, SUITE 300 CITY-ST-ZIP U00000120<u>624</u> CRY-ST-ZIP JACKSONVILLE FL 32257 04720704-80015-019 526.25 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 NAME STREET ADDRESS CITY-ST-78P CITY-ST-ZIP DOCUMENT # STREET ACCRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NASAK STREET ADDRESS CITY - ST - 71P 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

William L. Morgan

March 17, 2004 (904) 260-3030

FILED