2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

FILED May 06, 2004 08:00 AM Secretary of State

Zip Country S-9-3679560 Zip Country 5-9-3679560 5. Certificate of Status Desired 2-\$8.75	3) Applied For Not Applicable
2. Principal Place of Business 3. Mailing Address Surfe. Apt. #. etc. Surfe. Apt. #. etc. O1152004 Chg.LP CR2E003 (10/c0 City's State Cry's State Country Zip Country 59-3679560 5. Certificate of Status Deared D2 \$8.75 A Fee Required Agent 7. Name and Address of New Registered Agent 8. Street Address (P.O. Box Number is Not Acceptable) MAXWELL, LAWRENCE T 500 SOUTH FLORIDA AVE., SUITE 700 LAKELAND, FL 33801 8. The above named entry 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 the obligations of registered agent. Signatrue Spruke, hipse a princed registered agent and vite 4 expresses named entry 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 the obligations of registered agent. Signatrue Spruke, hipse a princed registered agent and vite 4 expresses named entry 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 the obligations of registered agent. Signatrue Spruke, hipse a princed registered agent and vite 4 expresses named ment must be filled to change a general partner. 12. GENERAL PARTINER THAT IS A BUSINESS PROPERTIES, INC. SIRET ADDRESS CHANGES ONLY DOUMBN? A & M BUSINESS PROPERTIES, INC. SIRET ADDRESS (CITY-ST-2P) 12. GENERAL PARTINER INFORMATION 13. ADDRESS CHANGES ONLY DOUMBN? A & M BUSINESS PROPERTIES, INC. SIRET ADDRESS (CITY-ST-2P) 13. ADDRESS CHANGES ONLY SIRET ADDRESS (CITY-ST-2P) 14. ADDRESS CHANGES ONLY SIRET ADDRESS (CITY-ST-2P) 15. ADDRESS CHANGES ONLY SIRET ADDRESS (CITY-ST-2P) 15. SIRET ADDRE	3) Applied For Not Applicable
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S. Name and Address of Current Registered Agent 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MAXWELL, LAWRENCE T 500 SOUTH FLORIDA AVE., SUITE 700 LAKELAND, FL 33801 City City FL Zip C Country Signature, typed or prised name of registered agent, or both, in the State of Florica. I am familiar with the obligations of registered agent, or both, in the State of Florica. I am familiar with the obligations of registered agent, or both, in the State of Florica. I am familiar with the obligations of registered agent. Signature, typed or prised name of registered agent and bits 4 appealable 9. Capital Contributions as Shown on record 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 filled to change a general partner. 12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY DOCUMBIT / NAME SIRRET ADDRESS LAKELAND, FL 33801	dditional
6. Name and Address of Current Registered Agent MAXWELL, LAWRENCE T 500 SOUTH FLORIDA AVE., SUITE 700 LAKELAND, FL 33801 City City FL Zip Ci 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with the obligations of registered agent. Signature 9. Capital Contributions as Shown on record Single Agent and vire 4 apprecise 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 filled to change a general partner. 12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY DOCUMENT / NAME A & M BUSINESS PROPERTIES, INC. STREET ADDRESS SIRRET ADDRESS LAKELAND, FL 33801 CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS	irea
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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 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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes	
SIGNATURE: Kyn & Filly 4/29/04 863-1047-1	e information 1 partnership o

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