


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

FILED 2

04 MAY 17 PM 1:33

FLORIDA STATE  
TALLAHASSEE FLORIDA

MJH

DOCUMENT # A01000000061					
1. Entity Name VERANO PROFESSIONAL PARK, LTD.					
Principal Place of Business 15051 SOUTH TAMiami TRAIL #203 FORT MYERS, FL 33908			Mailing Address 15051 SOUTH TAMiami TRAIL #203 FORT MYERS, FL 33908		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3711565	
6. Name and Address of Current Registered Agent  BROWN, KENNETH W 15051 SOUTH TAMiami TRAIL #203 FORT MYERS, FL 33908				7. Name and Address of New Registered Agent Name: Theodore L. Trupp, Jr. Street Address (P.O. Box Numbers Not Acceptable) Larson & Trupp 2325 East First Street City: Fort Myers, FL Zip Code: 33901	
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: <i>see attached page</i> DATE: _____					
9. Capital Contributions as Shown on record. \$600,000.00			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 #	P03000022900		STREET ADDRESS		
NAME	VERANO, INC.		CITY-ST-ZIP		
STREET ADDRESS	15051 SOUTH TAMiami TRAIL #203				
CITY-ST-ZIP	FORT MYERS, FL 33908				
DOCUMENT #			STREET ADDRESS	600037868316	
NAME			CITY-ST-ZIP	06/11/04-01010-034 **526.25	
STREET ADDRESS					
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NAME			CITY-ST-ZIP		
STREET ADDRESS					
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: <i>Edward D. Perkins</i>			5/14/04 239-466-7737		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		

STAPLE CHECK HERE



# Division of Corporations

## Annual Report

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ck# 1029 - htd  
4-14-04

Document Number  
**P03000022900**  
Business Entity Name  
**VERANO, INC.**

FEI Number **810608222**  
FEI Number Status ☐ Applied For ☐ Not Applicable ☐ Current  
Certificate of Status Desired ☒ Yes ☐ No

### Principal Place of Business

Address **15051 SOUTH TAMiami TRAIL #203**  
Suite, Apt. #, etc.   
City, State **FORT MYERS** **FL**  
Zip Code & Country **33908**

### Mailing Address

Address **15051 SOUTH TAMiami TRAIL #203**  
Suite, Apt. #, etc.   
City, State **FORT MYERS** **FL**  
Zip Code & Country **33908**

### Name And Address of Registered Agent

Name (Last, First, Middle, Title)      
-or- RA Business Name **Garvin & Tripp PA**  
Address **P.O. Drawer 2040**  
Suite, Apt. #, etc.   
City, State **FORT MYERS** **FL**  
Zip Code & Country **33902** **US**

If Registered Agent (RA) is changed, the new RA must type their name in the 'Registered Agent Signature' block below. RA signature MUST be an individual name. If the RA is a business entity, an individual must sign on their behalf. A business entity cannot serve as its

Registered Agent Signature **Theodore L Tripp, Jr.**