2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

BY', TRICIA BOODY,

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SECRETARY OF STATE DOCUMENT # A0100000135 04 APR 26 PM 1:42 BRIDGEWATER CLUB PARTNERS, LTD. Principal Place of Business Mailing Address 1103 W. HIBISCUS BLVD., SUITE 408 1103 W. HIBISCUS BLVD., SUITE 408 MELBOURNE, FL 32001 MELBOURNE, FL 32901 3. Mailing Address
P.O. BOX 496 1 2. Principal Place of Business 1551 SANDSPUR Suite, Apt. #, etc. 03162004 Chg-LP CR2E003 (10/03) City & State OR CANDO, FR 4. FEI Number Applied For 58-2660223 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **B&C CORPORATE SERVICES OF CENTRAL FLORIDA** Street Address (P.O. Box Number is Not Acceptable) 390 NORTH ORANGE AVE. **SUITE 1100** ORLANDO, FL 32801 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 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 10. Amount of Capital Contributions 9. Capital Contributions \$4,031,078.00 as Shown on record. in ELORIDA 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 flied to change a general partner. 12. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY F98000001282 DOCUMENT # STREET ADDRESS REGENCY INVESTMENT ASSOCIATES, INC. NAME STREET ADDRESS 2700 WYCLIFF ROAD, SUITE 312 CITY-ST-ZIP CITY-ST-ZIP RALEIGH, NC 27607 L02000030679 DOCUMENT # STREET ADDRESS <u>500034383685</u> 04/28/04--01021--009 **\$2 CED BRIDGEWATER, L.L.C. NAME STREET ADDRESS 1551 SANDSPUR ROAD CITY-ST-ZIP CITY-ST-ZIP MAITLAND, FL 32751 DOCUMENT # STREET ADDRESS 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-ZIP CITY-ST-ZIP STAPLE (DOCUMENT # STREET ADDRESS NAME STREET ADORESS CITY-ST-7IP 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 recurred by Chapter 620, Florida Statutes

BY: BRIDGEWATTER, L.C.C., GENERAL PORTNER. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

MANAGER

FILED