2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
04 APR 29 AM 10: 03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A01000000158

1. Entity Name
MJR PROPERTIES, LTD. LLLP

Principal Place of Business	Mailing Address
1741 VIA VENETIA WINTER PARK, FL 32789	POST OFFICE BOX 940896 MAITLAND, FL 32794

03202004 Chg-LP CR2E003 (10/03)

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 59-3706581 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRICE, PAMELA O ESQUIRE
301 E. PINE STREET, SUITE 1400
ORLANDO, FL 32801

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL 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

9. Capital Contributions as Shown on record. ~~$10,000,000.00~~

10. Amount of Capital Contributions in FLORIDA to date. $10,000 ← Please Note

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 #	P96000049873	STREET ADDRESS	
NAME	ROGERS HOLDINGS, INC.		
STREET ADDRESS	1741 VIA VENETIA	CITY-ST-ZIP	100035840251 05/10/04--01125--006 **158.75
CITY-ST-ZIP	WINTER PARK, FL 32789		
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STAPLE CHECK HERE

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: [signature] 3/30/04 (407) 339-3100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #