


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

**FILED**  
**Apr 20, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A01000000173</b> 1. Entity Name ALBRIGHT HOLDINGS, LTD.					
Principal Place of Business 3730 ESTERO BLVD. FT. MYERS BEACH, FL 33931			Mailing Address 3730 ESTERO BLVD. FT. MYERS BEACH, FL 33931		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc		Suite, Apt. #, etc			
City & State		City & State			
Zip	Country LEE	Zip	Country	4. FEI Number 37-1425629	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  ALBRIGHT, LARRY M 3730 ESTERO BLVD. FT. MYERS BEACH, FL 33931			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 _____ DATE _____ <small>Signature typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record \$980.00			10. Amount of Capital Contributions in FLORIDA to date		
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	ALBRIGHT, LARRY M		CITY - ST - ZIP		
STREET ADDRESS	3730 ESTERO BLVD.		CITY - ST - ZIP		
CITY - ST - ZIP	FT. MYERS BEACH, FL 33931		CITY - ST - ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	ALBRIGHT, MADALINE R		CITY - ST - ZIP		
STREET ADDRESS	3730 ESTERO BLVD.		CITY - ST - ZIP		
CITY - ST - ZIP	FT. MYERS BEACH, FL 33931		CITY - ST - ZIP		
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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 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>Larry M. Albright</i>			LARRY M. ALBRIGHT		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date 4/14/04		
			Daytime Phone 239-463-7753		

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