

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

DOCUMENT # A01000000180

1. Entity Name  
 CLEARWATER PARK, LTD.



FILED

2004 JUN 22 P 3: 25



Principal Place of Business  
 2828 CORAL WAY, PENTHOUSE SUITE  
 MIAMI, FL 33145

Mailing Address  
 2828 CORAL WAY, PENTHOUSE SUITE  
 MIAMI, FL 33145

2. Principal Place of Business  
 616 CLEARWATER PARK RD.

3. Mailing Address  
 1025 KANE CONCOURSE

Suite, Apt. #, etc.  
 Suite, Apt. #, etc.  
 SUITE 215

City & State  
 WEST PALM BEACH, FL - BAY HARBOR ISLANDS, FL

Zip  
 33401 33154

Country

04282004 Chg-LP CR2E003 (10/03)

4. FEI Number  
 65-1075841

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

CLEARWATER PARK TOWER AT CITY PLACE, INC.  
 C/O HOWARD D. COHEN  
 1025 KANE CONCOURSE, SUITE 215  
 BAY HARBOR ISLANDS, FL 33154

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.

500038287305

06/23/04-01088-003 \*\*141.25

9. Capital Contributions  
 as Shown on record \$999.00

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

DOCUMENT # P01000013001  
 NAME CLEARWATER PARK, INC. TOWER AT CITYPLACE  
 STREET ADDRESS 2828 CORAL WAY, PENTHOUSE SUITE  
 CITY-ST-ZIP MIAMI, FL 33145

13. ADDRESS CHANGES ONLY

STREET ADDRESS 1025 Kane Concourse, Suite 215  
 CITY-ST-ZIP Bay Harbor Islands, FL 33154

DOCUMENT #  
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 CITY-ST-ZIP

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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: [Signature] President

4/30/04

305-867-2245

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE