FILED
May 06, 2004 08:00 AM
Secretary of State

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A01000000224

1. Entity Name
BERNIE ASSOCIATES, LTD.

Principal Place of Business	Mailing Address
2872 N.W. 28TH STREET BOCA RATON, FL 33434	2872 N.W. 28TH STREET BOCA RATON, FL 33434
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

04302004 Chg-LP CR2E003 (10/03)

4. FEI Number 65-1081996 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent
SAN FILIPPO, MARSHA
2872 N.W. 28TH STREET
BOCA RATON, FL 33434

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
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. $990.00

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 this form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P01000015328	STREET ADDRESS	
NAME	BERNIE ASSOCIATES, INC.		
STREET ADDRESS	2872 N.W. 28TH STREET	CITY-ST-ZIP	
CITY-ST-ZIP	BOCA RATON, FL 33434		
DOCUMENT #		STREET ADDRESS	U00000160275 05/13/04--00014--021 150.00
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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: Marsha San Filippo 4/30/04 561-852-7892
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #