

# **2004 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A01000000403

**FILED**  
**Aug 31, 2004**  
**Secretary of State**

**Entity Name:** ZEMKOSKI FAMILY PARTNERSHIP, LTD.

**Current Principal Place of Business:**

601 E. STRAWBRIDGE AVENUE  
MELBOURNE, FL 32901

**New Principal Place of Business:**

**Current Mailing Address:**

601 E. STRAWBRIDGE AVENUE  
MELBOURNE, FL 32901

**New Mailing Address:**

**FEI Number:** 11-3685514      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

MOULE, REX E  
601 E. STRAWBRIDGE AVENUE  
MELBOURNE, FL 32901      US

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Capital Contributions as Shown on record:** 680,000.00  
**Amount of Capital Contributions in Florida to date:** 0.00

**GENERAL PARTNER INFORMATION:**

**ADDRESS CHANGES ONLY:**

Document #:

Name: ZEMKOSKI MANAGEMENT CORP.  
Address: 601 E. STRAWBRIDGE AVENUE  
City-St-Zip: MELBOURNE, FL 32901

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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:** JEAN ZEMKOSKI

GP

08/31/2004

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date