2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2004

Mar 19, 2004 08:00 AM Secretary of State DOCUMENT # A01000000432 1. Entity Name CAMBRIDGE VILLAGE, LTD. Principal Place of Business Mailing Address 1311 SOUTH VINELÄND ROAD WINTER GARDEN FL 34787 1311 SOUTH VINELAND ROAD WINTER GARDEN FL 34787 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc Suite, Apt #. etc CR2E003 (11/03) MOORE City & State City & State Applied For 59-3708787 Not Applicate Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROBB, PAMELA M Street Address (P.O. Box Number is Not Acceptable) C/O PAMELA MILTON ROBB, P.A. 1311 SOUTH VINELAND ROAD WINTER GARDEN FL 34787 City 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. DATE 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STAI \$1,000,000.00 as Shown on record. in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION 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 # P93000030303 STREET ADDRESS VILLAGE CONSTRUCTION CO., INC. NAME STREET ADDRESS 1046 LAKE FRANCIS DRIVE CITY - ST - ZIP CITY-ST-ZIP APOPKA FL 32712 <u> 11000000097416</u> DOCUMENT # 03/26/04-80038-021 141.25 STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT A STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY - ST - ZIP 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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

D NAME OF SIGNING GENERAL PARTNER

FILED

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