


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

FILED
Jun 01, 2004 08:00 AM
Secretary of State

DOCUMENT # A01000000764	
1. Entity Name HOBBY FAMILY LIMITED PARTNERSHIP, LLP	

Principal Place of Business 1537 CORAL WAYS ST. PETERBURG FL 33705	Mailing Address 1537 CORAL WAYS ST. PETERBURG FL 33705
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc	Suite, Apt. #, etc
City & State	City & State
Zip	Country



MOORE CR2E003 (11/03)

4. FEI Number 59-3280305	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HOBBY, ROYCE 1537 CORAL WAYS ST. PETERBURG FL 33705	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.	DATE
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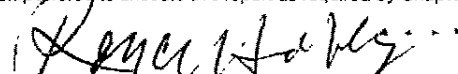
9. Capital Contributions as Shown on record. \$534,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF ST. SEE REVERSE SIDE FOR FEE INFORMATION
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A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED 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 #	NAME	STREET ADDRESS	
NAME	HOBBY, ROYCE TRUSTEE	CITY-ST-ZIP	U000000162039
STREET ADDRESS	1537 CORAL WAYS		05/03/04-30006-001 526.25
CITY-ST-ZIP	ST. PETERBURG FL 33705	STREET ADDRESS	
DOCUMENT #	NAME	CITY-ST-ZIP	
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DOCUMENT #	NAME	CITY-ST-ZIP	
NAME		STREET ADDRESS	
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP		STREET ADDRESS	

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; the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: 	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Royce Hobby	DATE 15 June 2004	Daytime Phone # (727) 865-062
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