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

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

		<b>-y</b> ., <b>-</b>			_·	
DOCUMENT # A0100000769  1. Entity Name AV FAMILY LIMITED PARTNERSHIP						-
Principal Place of Business Mailing Address					04 APR 30 PM 12: 16	
			=			
SUITE 400	OUT DRIVE	1725 UNIVERSITY DRIVE SUITE 400			SECRETARY OF STATE TALLAHASSEE FLORIDA	
CORAL SPRINGS, FL 33071		CORAL SPRINGS, FL 33071			TALLAHASSEE FLORIDA	
00.012.02.13.1			7,17		I LEBRURI KUNI KANDI IRRIT MBUKI	
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04222004 Chg-LP CR2E003 (10/03)	
	· · · · · · · · · · · · · · · · · · ·		•	,	5 122200 (10/00)	
City & State		City & State			4. FEI Number Applied	For plicable
Zip	Country	Country Zip Co		у	5. Certificate of Status Desired   \$8.75 Addition Fee Required	al
	6. Name and Address of Current I	Registered Agent			7. Name and Address of New Registered Agent	
			Name		•	
AV FAMILY, LLC				70471.5474°25°	VD O. Dov. Ni mbas in Nat. Association	=
1725 UNIVERSITY DRIVE				Street Address	s (P.O. Box Number is Not Acceptable)	_
SUITE 400						
CORAL SE	PRINGS, FL 33071		L			
• •	-		1	City	FL Zip Code	
9 The shave	named artitle submits this statement for	the purpose of changing ite r	onintoror	d office or request	tered agent, or both, in the State of Florida. I am familiar with, and	accont
	ions of registered agent.			Tomes of legisli	brod agent, or boar, article detector notice. Translation was, and	ассері
SIGNATURE -				<del></del>		
	Signature, typed or printed name of registered agent a				DATE	
9. Capital Co	ntributions on record. \$7,500.00	10. Amount of Capital		ntions		
as Snown	on record. 5 47,000.00	in FLORIDA to da	ie.			-
•	A GENERAL PARTNER T	HAT IS A BUSINESS ENT	TITY MU	ST BE REGIS	STERED AND ACTIVE WITH THIS OFFICE.	
	NOTE: General Partners MA	Y NOT be changed on th	e form;	an amendme	ent must be filed to change a general partner.	
12.	GENERAL PARTNER	INFORMATION	13.	1	ADDRESS CHANGES ONLY	
DOCUMENT #	L01000008975		STREET	T ADDRESS		
NAME (	AV FAMILY, LLC				·	<u> </u>
STREET ADDRESS	1725 UNIVERSITY DRIVE		·CITY-S	T-71P		
CITY-ST-ZIP	CORAL SPRINGS, FL 33071		<b>U</b>	, <u></u>	600026492996	
DOCUMENT #			CTDE	T ADDDERO	05/14/0401060023 **141.25	
NAME		•	SINEE	TADDRESS		
STREET ADDRESS			спу-я	77 780		
CITY-ST-ZIP			CITT-S	piezir :		•
DOCUMENT #			·			
NAME			STREET	TADDRESS	<u>en la en la companya de la encompanya d</u>	· • · · ·
STREET ADDRESS	. :		CEDY C	T 700		
CITY - ST-ZIP	•		CITY-S	51-24	•	
DOCUMENT #		n,			,	
NAME	:	,	STREET	T ADDRESS		
STREET ADDRESS			arthy a	7 7th		
CITY-ST-ZIP	i .	•	CITY-S	51-21		
DOCUMENT #			етрег	T 4 D D D C D D		
NAME	;		SIMEE	T ADDRESS	·	•
STREET ADDRESS						
CITY-ST-ZIP		-	CITY-S	51- <i>2</i> 1P		`
DOCUMENT #				1	, (	_
NAME	·	•	STREET	T ADDRESS	(A) (A)	,
STREET ADDRESS		•		.		
CITY-ST-ZIP	·.		CITY-S	ST- 28P	·	
٠ , ,	portify that the information are aliced with	this filing does not as all the	the aver	ention state 4 in C	Section 110 07/3/(i) Florida Chat, dear 1 6 with a section 44-4 44-4 44-4	ntion
indicated		that my signature shall have th	he same l	legal effect as if	Section 119.07(3)(i), Florida Statutes. I further certify that the inform f made under oath; that I am a General Partner of the limited partner	