

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

**DOCUMENT # A01000001013**

1. Entity Name  
**SBC DEVELOPMENTS, L.L.L.P.**



**FILED**

**04 MAY 26 PM 1:37**

**SEAL, MAY 11, 2004  
TALLAHASSEE, FLORIDA**

**WJH**

Principal Place of Business  
**1 SOUTH SCHOOL AVENUE, SUITE 500  
SARASOTA, FL 34237**

Mailing Address  
**1 SOUTH SCHOOL AVENUE, SUITE 500  
SARASOTA, FL 34237**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03202004

Chg-LP

CR2E003 (10/03)

**5/26**

City & State

City & State

4. FEI Number

Applied For

Zip

Country

Zip

Country

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

Not Applicable

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LIEBERMAN, LARRY P  
1 SOUTH SCHOOL AVENUE, SUITE 500  
SARASOTA, FL 34237**

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

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

DATE

9. Capital Contributions as Shown on record. **\$235,000.00**

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

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # **A00000001762**  
NAME **BGI DEVELOPMENT, L.L.L.P.**  
STREET ADDRESS **1 SOUTH SCHOOL AVENUE, SUITE 500**  
CITY-ST-ZIP **SARASOTA, FL 34237**

STREET ADDRESS **500037869299**  
CITY-ST-ZIP **06/11/04--01022--012 \*\*526.25**

DOCUMENT # **M01000001672**  
NAME **ALEXANDER BERNE/SBC LLC**  
STREET ADDRESS **20 WEST 64TH STREET**  
CITY-ST-ZIP **NEW YORK, NY 10023**

STREET ADDRESS

CITY-ST-ZIP

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

**SIGNATURE:**

**By: BGI Development, L.L.P., General Partner**  
**By: Alexander Berne, SBC LLC, General Partner**

Date

Daytime Phone #

**4/29/04 to 941-555-8000**

STAPLE CHECK HERE