

2004 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2004

DOCUMENT # A01000001095

1. Entity Name  
PALMETTO PARK I, LTD.



Principal Place of Business  
150 E. PALMETTO PARK ROAD, #401  
BOCA RATON, FL 33432

Mailing Address  
150 E. PALMETTO PARK ROAD, #401  
BOCA RATON, FL 33432

FILED  
04 APR 27 PM 3:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

60.000



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04202004

Chg-LP

CR2E003 (10/03)

4/27

City & State

City & State

4. FEI Number

65-1134095

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIMIGRAN, KENNETH H  
150 E. PALMETTO PARK ROAD, #401  
BOCA RATON, FL 33432

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.

\$4,100,000.00

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

DOCUMENT # P01000078575  
NAME WC PALMETTO PARK INC  
STREET ADDRESS 150 E. PALMETTO PARK ROAD, #401  
CITY-ST-ZIP BOCA RATON, FL 33432

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
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NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS 150 E. PALMETTO PARK ROAD, #340  
BOCA RATON, FL 33432

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

900036197659  
05/12/04-01044-021 \*\*535.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #