


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # A01000001178 1. Entity Name: BAR D PROPERTIES, LTD.					
Principal Place of Business 7710 COUNTY ROAD 305 BUNNELL, FL 32110			Mailing Address 7710 COUNTY ROAD 305 BUNNELL, FL 32110		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01262004 Chg-LP CR2E003 (10/03)	
4. FEI Number 37-1457823				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired: <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
CLARK, RONALD E 501 ST JOHNS AVE PALATKA, FL 32177			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ DATE _____ <small>(Signature typed, printed name of registered agent and title, if applicable)</small>					
9. Capital Contributions as Shown on record \$300.00		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 # NAME STREET ADDRESS CITY, ST, ZIP	COWART, PATRICIA D 7710 COUNTY ROAD 305 BUNNELL, FL 32110		STREET ADDRESS CITY, ST, ZIP	 	
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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: <i>Patricia D. Cowart</i>			4-26-04		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>DATE</small>		

STAPLE CHECK HERE

X