

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

**FILED**  
**May 04, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A01000001187</b>					
<b>1. Entity Name</b> NORTHLAKE PROPERTY INVESTMENTS LIMITED PARTNERSHIP					
<b>Principal Place of Business</b> % PHILIP D. LEWIS 31 W. 20TH STREET RIVIERA BEACH, FL 33404			<b>Mailing Address</b> P.O. BOX 9726 C/O PHILIP D LEWIS RIVIERA BEACH, FL 33419		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 65-1138902	
<b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  HAFT, STUART J 321 ROYAL POINCIANA PLAZA C/O ALLEY, MAASS, ROGERS & LINDSEY, P.A. PALM BEACH, FL 33480			<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City		
FL			Zip Code		
<b>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</b>					
SIGNATURE _____ DATE _____ <small>Signature: typed or printed name of registered agent and title if applicable</small>					
<b>9. Capital Contributions as Shown on record</b>			<b>10. Amount of Capital Contributions in FLORIDA to date</b>		
\$2,000,000.00			378,500.00		
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P01000085396 PDL MANAGEMENT, INC. 31 WEST 20TH STREET RIVIERA BEACH, FL 33404		STREET ADDRESS  CITY-ST-ZIP	U000000159721 05/10/04-80042-023 535.00	
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<b>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</b>					
<b>SIGNATURE:</b> <i>Philip D. Lewis</i>			4/27/04		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date		
			Daytime Phone #		

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