

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 JUN -4 PM 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01272004 Chg-LP CR2E003 (10/03)

| | | | | | |
|---|-------------------------------------|---|--|--|--|
| DOCUMENT # A01000001228 1. Entity Name FINLAY INTERESTS 40, LTD. | | | | | |
| Principal Place of Business 4300 MARSH LANDING BLVD., SUITE 101 JACKSONVILLE BEACH, FL 32250 | | | Mailing Address 4300 MARSH LANDING BLVD., SUITE 101 JACKSONVILLE BEACH, FL 32250 | | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | 3. Mailing Address Suite, Apt. #, etc. | | | |
| City & State Zip Country | | City & State Zip Country | | | |
| 4. FEI Number 55-0795143 | | | | 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 B&C CORPORATE SERVICES OF CENT. FL., INC. 390 NORTH ORANGE AVE., SUITE 1100 ORLANDO, FL 32801 | | | 7. Name and Address of New Registered Agent Name: FINLAY HOLDINGS, INC. Street Address (R.Q. Box Number is Not Acceptable): Suite 101 4300 MARSH LANDING BLVD City: JAL BEACH FL 32250 | | |
| 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. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE: <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 50%; text-align: right;"> C. FINLAY - DIRECTOR 2-10-4 <small>DATE</small> </div> </div> | | | | | |
| 9. Capital Contributions as Shown on record. \$50.00 | | 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 # | L01000015509 | | STREET ADDRESS | | |
| NAME | FINLAY INTERESTS GP 40, LLC | | CITY - ST - ZIP | | |
| STREET ADDRESS | 4300 MARSH LANDING BLVD., SUITE 101 | | STREET ADDRESS | | |
| CITY - ST - ZIP | JACKSONVILLE BEACH, FL 32250 | | CITY - ST - ZIP | | |
| DOCUMENT # | | | STREET ADDRESS | | |
| NAME | | | CITY - ST - ZIP | | |
| STREET ADDRESS | | | 700037845877 06/10/04--01047--014 **141.25 | | |
| CITY - ST - ZIP | | | STREET ADDRESS | | |
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| NAME | | | | | |
| STREET ADDRESS | | | | | |
| 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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> | | | C. FINLAY - MGR 2-10-4 <small>Date</small> | | |
| | | | 904-280-1000 <small>Daytime Phone #</small> | | |

STAPLE CHECK HERE