

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

FILED

04 JUN 25 AM 9:29

CLERK OF DISTRICT COURT  
 TALLAHASSEE, FLORIDA

MJR

DOCUMENT # A01000001505

1. Entity Name  
 FINLAY INTERESTS 9, 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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01272004

Chg-LP

CR2E003 (10/03)

6/25

4. FEI Number  
 59-3756919

Applied for  
 Not Applicable

5. Certificate of Status Desired

☒ \$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 (P.O. Box Number is Not Acceptable)  
 4300 MARSH LANDING BLVD  
 Suite 101  
 City JAX BEACH FL Zip Code 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.

SIGNATURE

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

DATE

C. FINLAY, DIRECTOR 2-10-4

9. Capital Contributions  
 as Shown on record. \$993,831.00

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 # L01000019529  
 NAME FINLAY INTERESTS GP 9, LLC  
 STREET ADDRESS 4300 MARSH LANDING BLVD., SUITE 101  
 CITY-ST-ZIP JACKSONVILLE BEACH, FL 32250

DOCUMENT #  
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 CITY-ST-ZIP

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 CITY-ST-ZIP

DOCUMENT #  
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

C. FINLAY, MGRN 2-10-4

Date

Daytime Phone #

STAPLE CHECK HERE