


**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004**

DOCUMENT # A01000001617 1. Entity Name VESTCOR EXECUTIVE PARTNERSHIP 2002, LLLP					
Principal Place of Business 3020 HARTLEY ROAD SUITE 300 JACKSONVILLE FL 32257			Mailing Address 3020 HARTLEY ROAD SUITE 300 JACKSONVILLE FL 32257		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-3761041	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent FARRELL, MARK T 3020 HARTLEY ROAD SUITE 300 JACKSONVILLE FL 32257				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 04/28/04 01025 001 **526-25 400034388314 04/28/04 01025 001 **526-25 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record.		\$100,000.00		10. Amount of Capital Contributions in FLORIDA to date.	
11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION					
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 # P98000033302 NAME VESTCOR, INC. STREET ADDRESS 3020 HARTLEY ROAD CITY-ST-ZIP JACKSONVILLE FL 32257			STREET ADDRESS 3020 Hartley Road, Suite 300 CITY-ST-ZIP Jacksonville, FL 32257		
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

William L. Morgan
William L. Morgan

March 17, 2004 (904) 260-3030

Date Daytime Phone #