

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

APPROVED
AND
FILED

04 MAY -4 PM 5:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A02000000578

1. Entity Name
THE JOSEPH BURNS FAMILY LIMITED PARTNERSHIP, LTD.



Principal Place of Business
**4311 GULF OF MEXICO DRIVE, #504
 LONGBOAT KEY, FL 34228**

Mailing Address
**1050 RICO ROAD
 MOROEVILLE, PA 15146**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02242004

Chg-LP

CR2E003 (10/03)

City & State

City & State

MONROEVILLE

4. FEI Number

04-3639008

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SOSS, MARC J ESQ.
 C/O BECKER & POLIAKOFF, P.A.
 630 SOUTH ORANGE AVENUE
 SARASOTA, FL 34236**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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

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

DATE

9. Capital Contributions
 as Shown on record. **\$0.00**

10. Amount of Capital Contributions
 in FLORIDA to date.

Handwritten symbol

**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
**BURNS, HELEN
 4311 GULF OF MEXICO DRIVE, #504
 LONGBOAT KEY, FL 34228**

STREET ADDRESS
 CITY-ST-ZIP
**400036549164
 05/19/04--01048--017 **150.00**

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**BURNS, CHRISTOPHER TRUSTEE
 1050 RICO ROAD
 MONROEVILLE, PA 15146**

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**BURNS, HELEN TRUSTEE
 1050 RICO ROAD
 MONROEVILLE, PA 15146**

STREET ADDRESS
 CITY-ST-ZIP

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 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: *X [Signature]*

4/27/04 412-242-2800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE