


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 19, 2004 08:00 AM
Secretary of State

DOCUMENT # A02000000656		
1. Entity Name THE WHITMIRE FAMILY PARTNERS, LTD.		

Principal Place of Business 1146 OVERBROOK DRIVE ORLANDO, FL 32804	Mailing Address 1201 S. ORLANDO AVENUE SUITE 350 WINTER PARK, FL 32789
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
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Zip	Country	Zip	Country
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6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
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BRYANT, CARLA DELOACH 1201 SOUTH ORLANDO AVENUE, SUITE 350 WINTER PARK, FL 32789	Name Street Address (P.O. Box Number is Not Acceptable) City
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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
Signature, typed or printed name of registered agent and title if applicable	

9. Capital Contributions as Shown on record. \$750,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$750,000.00
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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 #	P02000084428	STREET ADDRESS	
NAME	BETTY WHITMIRE COMPANY, INC.	CITY-ST-ZIP	
STREET ADDRESS	1146 OVERBROOK DRIVE		
CITY-ST-ZIP	ORLANDO, FL 32804		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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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)(f), 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: 	Date: 3-31-04	Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		

STAPLE CHECK HERE