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

DOCUMENT # A02000001074

1. Entity Name
BAGLEY DEVELOPMENT PARTNERSHIP, LTD.

FILED
2004 JUN 14 PM 4:53
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

MOORE CR2E003 (11/03)

Principal Place of Business	Mailing Address
4200 FOREST HILLS DRIVE LAKELAND FL 33813	4200 FOREST HILLS DRIVE LAKELAND FL 33813

2. Principal Place of Business	3. Mailing Address
4404 S. Florida Ave	4404 S. Florida Ave
Suite, Apt. #, etc.: Suite #2	Suite, Apt. #, etc.: Suite #2
City & State: Lakeland Fl	City & State: Lakeland Fl
Zip: 33813 Country: USA	Zip: 33813 Country: USA

4. FEI Number 59-3355184 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LANCASTER, JOHN J
500 SOUTH FLORIDA AVENUE, SUITE 800
~~LAKELAND FL 33801~~

7. Name and Address of New Registered Agent

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

9. Capital Contributions as Shown on record. $15,000,000.00

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 #	P02000085394	STREET ADDRESS	
NAME	BAGLEY ENTERPRISES, INC.		
STREET ADDRESS	4200 FOREST HILLS DRIVE	CITY-ST-ZIP	
CITY-ST-ZIP	LAKELAND FL 33813		
DOCUMENT #		STREET ADDRESS	700038162567 06/22/04--01007--017 **526.25
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STAPLE CHECK HERE

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: ______________________ 4/30/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #