2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

FILED
Jul 16, 2004 08:00 AM
Secretary of State

DOCUMENT # A02000001336

1. Entity Name
BLACK CREEK, LLLP

Principal Place of Business	Mailing Address
C/O S. BRYAN JENNINGS 107 RIVER RD. ORANGE PARK, FL 32073	C/O S. BRYAN JENNINGS 107 RIVER RD. ORANGE PARK, FL 32073

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc		Suite, Apt. #, etc	
City & State		City & State	
Zip	Country	Zip	Country

07022004 Chg-LP CR2E003 (10/03)

4. FEI Number: 56-2297212 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

HORNE, BONNIE C
10 MARIA PLACE
PONTE VEDRA BEACH, FL 32082

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.	10. Amount of Capital Contributions in FLORIDA to date.	In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.
$5,665,434.00		

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	P02000103231 BLACK CREEK INVESTMENTS, INC. 10 MARIA PLACE PONTE VEDRA BEACH, FL 32082	STREET ADDRESS / CITY-ST-ZIP	00000016881З 07/16/04-80013-011 526.25
DOCUMENT # / NAME / STREET ADDRESS / CITY-ST-ZIP	JENNINGS, S. BRYAN JR. 107 RIVER RD. ORANGE PARK, FL 32073	STREET ADDRESS / CITY-ST-ZIP	
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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: S. Bryan Jennings Jr 7/2/04 (904) 264-8573
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #