


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

| | | | |
|--|---------|---|---------|
| DOCUMENT # A02000001450 1. Entity Name H & B ADVENTURE, LTD. | |  | |
| Principal Place of Business 107 THURSTON PL CRESTVIEW, FL 32536 | | Mailing Address P.O. BOX 667 CRESTVIEW, FL 32536 | |
| 2. Principal Place of Business Suite, Apt. #, etc. City & State | | 3. Mailing Address Suite, Apt. #, etc. City & State | |
| Zip | Country | Zip | Country |



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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01172004 Chq-LP CR2E003 (10/03)

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|--------------|---------|--------------|---------|---|--|---------------------------------------|--|
| City & State | | City & State | | 4. FEI Number 81-0576333 | | Applied For | |
| | | | | | | Not Applicable | |
| Zip | Country | Zip | Country | 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent | |
|---|--|-------------|
| HILL, RANDY 107 THURSTON PL CRESTVIEW, FL 32536 | 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. | \$10,267.00 | 10. Amount of Capital Contributions in FLORIDA to date. | |
|---|-------------|--|--|

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. | | 13. | |
|---|---|---------------------------------------|---|
| GENERAL PARTNER INFORMATION | | ADDRESS CHANGES ONLY | |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | HILL, DIANA L 107 THURSTON PL CRESTVIEW, FL 32536 | STREET ADDRESS CITY - ST - ZIP | |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | | STREET ADDRESS CITY - ST - ZIP | 800035829078 05/10/04--01096--017 **160.64 |
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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: *Diana L. Hill* DIANA L. HILL 4/17/04 850.682.9686
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE