2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

APLE

FILED **DOCUMENT # A02000001531** 1. Entity Name 04 MAY -3 PM 6: 30 BEACH CLUB U.S., LTD. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 3801 PGA BLVD., SUITE 508 3801 PGA BLVD., SUITE 508 C/O DARYL CRAMER & ASSOC., P.A. C/O DARYL CRAMER & ASSOC., P.A. PALM BEACH GARDENS, FL 33410-2758 PALM BEACH GARDENS, FL 33410-2758 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03022004 Chg-LP CR2E003 (10/03) City & State City & State 4. FEI Number Applied For APPLIED FOR Not Applicable Country Zip Country Zio \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DARYL CRAMER & ASSOCIATES, P.A. Street Address (P.O. Box Number is Not Acceptable) 3801 PGA BLVD., SUITE 508 PALM BEACH GARDENS, FL 33410-2758 Zip Code City 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. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE 10. Amount of Capital Contributions 9. Capital Contributions \$6,400,000.00 in FLORIDA to date. \$6,400,000.00 as Shown on record. 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 P02000122153 DOCUMENT # STREET ADDRESS NAME BEACH CLUB U.S. GENERAL PARTNER, INC. STREET ADDRESS 3801 PGA BLVD., SUITE 508 CITY-ST-7IP CITY-ST-ZIP PALM BEACH GARDENS, FL 334102758 DOCUMENT # 400036552514 05/18/04 01055 007 **\$35.00 STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DOCUMENT ≱** STREET ADDRESS CHECK NAME STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME 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)(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 General Partner, Inc. Beach Club MARCH 31/64 By: SIGNATURE: _ Daytime Phone