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

FILED Apr 21, 2004 08:00 AM Secretary of State **DOCUMENT # A03000000326** 1. Entity Name GREGG VENTURES, LLLP Principal Place of Business Mailing Address 1326 NORTH BLVD. WEST SUITE 7 LEESBURG FL 34748 1326 NORTH BLVD. WEST SUITE 7 LEESBURG FL 34748 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E003 (11/03) Applied For 4. FEI Number City & State City & State Not Applicable 05-0555912 \$8.75 Additional Ζφ Country Žip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GREGG, JAMES R 1326 NORTH BLVD. WEST SUITE 7 LEESBURG FL 34748 Street Address (P.O. Box Number is Not Acceptable) Zip Cade 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature: hyped or printed name of registered agent and fills if applicable 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 10. Amount of Capital Contributions 9. Capital Contributions \$5,500,000.00 in FLORIDA to date. \$ 2,486,879. SEE REVERSE SIDE FOR FEE INFORMATION 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. DOCUMENT # STREET ADDRESS GREGG, JAMES R TRUSTEE NAME STREET ADDRESS 1326 NORTH BLVD. WEST SUITE 7 CITY-ST-ZIP U00000136274 CITY-ST-ZIP LEESBURG FL 34748 04/29/04-80003-022 526.25 DOCUMENT # STREET ADORESS GREGG, JAMES R TRUSTEE NAME STREET ADDRESS 1326 NORTH BLVD. WEST SUITE 7 CITY-ST-ZIP LEESBURG FL 34748 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 ERE ERE ODCHMENT (STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 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 1 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

James R. Gregg,

GNING GENERAL PARTNER

SIGNATURE

04-19-04

(352) 787-4434

Daytime Phone #