


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

04 MAR 16 AM 10:31

DOCUMENT # A03000000577		
1. Entity Name TEW FAMILY LIMITED PARTNERSHIP		

Principal Place of Business 2100 COUNTRY CLUB DRIVE LYNN HAVEN, FL 32444	Mailing Address 2100 COUNTRY CLUB DRIVE LYNN HAVEN, FL 32444
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



01132004 Chg-LP CR2E003 (10/03)

4. FEI Number 61-1446223	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent TEW, MARILYN 2100 COUNTRY CLUB DRIVE LYNN HAVEN, FL 32444	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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. \$25,000,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 #	TEW, MARILYN	STREET ADDRESS	
NAME	2100 COUNTRY CLUB DRIVE	CITY-ST-ZIP	
STREET ADDRESS	LYNN HAVEN, FL 32444		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	300031755413
NAME		CITY-ST-ZIP	04/02/04--01071--010 **526.25
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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

SIGNATURE: Marilyn Tew Marilyn Tew President 2/19/04 850-265-2195
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE