


**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

<b>DOCUMENT # A03000000770</b> 1. Entity Name <b>EWING WATERPROOFING SYSTEMS MATERIALS, LTD.</b>	
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**FILED**

04 APR 29 AM 10:04

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



Principal Place of Business 1315 NW 4TH PLACE GAINESVILLE, FL 32603	Mailing Address 1315 NW 4TH PLACE GAINESVILLE, FL 32603
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

04262004 Chg-LP CR2E003 (10/03)

4. FEI Number 562359225	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  LITTELL, CHARLES W 4041 NW 43RD AVE.- SUITE B GAINESVILLE, FL 32606	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. <b>\$7,500.00</b>	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 # NAME STREET ADDRESS CITY-ST-ZIP	P03000051418 EWS PARTNERS, INC. 1315 NW 4TH PLACE GAINESVILLE, FL 32603	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:**

  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/26/04

Date

752-372 4353

Daytime Phone #