

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

APPROVED  
AND  
FILED

04 MAY -4 PM 4: 27  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

<b>DOCUMENT # A03000000819</b>					
<b>1. Entity Name</b> GASSER FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP, LLLP					
<b>Principal Place of Business</b> 1723 PINE CREEK COURT LAKE MARY, FL 32746			<b>Mailing Address</b> 1723 PINE CREEK COURT LAKE MARY, FL 32746		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b>	
				04302004    Chg-LP    CR2E003 (10/03)	
				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> \$8.75 Additional Fee Required					
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
SHIRLEY, JONATHAN W 171 CIRCLE DRIVE MAITLAND, FL 32751			Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code		
<b>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.</b>					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>9. Capital Contributions</b> as Shown on record.    \$297,500.00		<b>10. Amount of Capital Contributions</b> in FLORIDA to date.			
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT #	L03000018875		STREET ADDRESS		
NAME	CHAUTAUQUA FAMILY INVESTMENTS, LLC		CITY-ST-ZIP		
STREET ADDRESS	1723 PINE CREEK COURT				
CITY-ST-ZIP	LAKE MARY, FL 32746				
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CITY-ST-ZIP					
<b>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.</b>					
<b>SIGNATURE:</b> <i>Jeffrey A. Gasser</i>			Date: 4/30/04    Daytime Phone #: 333-3335		



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