

2004 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A03000000828

FILED
Aug 25, 2004
Secretary of State

Entity Name: WESTON PAVILION PARTNERS, LLLP

Current Principal Place of Business:

2229 NORTH COMMERCE PARKWAY, SUITE 100
C/O WESTON OUTPATIENT SURGICAL CENTER
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

2229 NORTH COMMERCE PARKWAY, SUITE 100
C/O WESTON OUTPATIENT SURGICAL CENTER
WESTON, FL 33326

New Mailing Address:

FEI Number: 20-0027042 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

Name and Address of Current Registered Agent:

DAVID J. POWERS, P.A.
7777 GLADES ROAD, SUITE 300
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Capital Contributions as Shown on record: 7,500.00
Amount of Capital Contributions in Florida to date: 0.00

GENERAL PARTNER INFORMATION:

Document #:

Name: PAVILION GENERAL PARTNER, LLC.
Address: 2229 NORTH COMMERCE PARKWAY, SUITE 100
City-St-Zip: WESTON, FL 33326

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: SAUL R. EPSTEIN

VP

08/25/2004

Electronic Signature of Signing General Partner

Date