

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 APR-27 PM 3:09

SECRETARY OF STATE
 TALLAHASSEE FLORIDA


MMK



04252004 Chg-LP CR2E003 (10/03) 4/27

DOCUMENT # A03000000865

1. Entity Name
 WESTCITY PLANTATION, LTD.



Principal Place of Business
 150 E. PALMETTO PARK RD., STE. 401
 BOCA RATON, FL 33432

Mailing Address
 150 E. PALMETTO PARK RD., STE. 401
 BOCA RATON, FL 33432

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number
 20-0041175

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIMIGRAN, KENNETH H
 150 E. PALMETTO RD., STE. 401
 BOCA RATON, FL 33432

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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]* DATE

9. Capital Contributions as Shown on record: \$7,500.00

10. Amount of Capital Contributions in FLORIDA to date: 6,000,000

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

DOCUMENT #	L03000010056
NAME	WESTCITY LAKESIDE DEVELOPMENT, LLC <i>Plantation</i>
STREET ADDRESS	150 E PALMETTO PARK RD, STE 401
CITY - ST - ZIP	BOCA RATON, FL 33432
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDRESS CHANGES ONLY

STREET ADDRESS	150 E. PALMETTO PARK ROAD, #340
CITY - ST - ZIP	BOCA RATON, FL 33432
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	300036197613
CITY - ST - ZIP	05/12/04--01044--017 **535.00
STREET ADDRESS	
CITY - ST - ZIP	
STREET ADDRESS	
CITY - ST - ZIP	
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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date Daytime Phone #

STAPLE CHECK HERE