

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

04 MAR -1 AM 9:27

DOCUMENT # A03000000919	
1. Entity Name MAINSTREET LAKESIDE INVESTMENTS, LTD.	



Principal Place of Business ONE FINANCIAL PLAZA, STE 2212 FT LAUDERDALE, FL 33394	Mailing Address ONE FINANCIAL PLAZA, STE 2212 FT LAUDERDALE, FL 33394
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01192004 Chg-LP CR2E003 (10/03)

4. FEI Number	<input checked="" type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	
MAINSTREET LAKESIDE INVESTMENTS, INC. ONE FINANCIAL PLAZA, STE 2212 FT LAUDERDALE, FL 33394	

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$7,500.00	10. Amount of Capital Contributions in FLORIDA to date. \$7500.00	\$141.25 + \$8.75
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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 #	P03000068817	STREET ADDRESS	
NAME	MAINSTREET LAKESIDE INVESTMENTS, INC.	CITY - ST - ZIP	
STREET ADDRESS	ONE FINANCIAL PLAZA, STE 2212		
CITY - ST - ZIP	FT LAUDERDALE, FL 33394		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
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CITY - ST - ZIP			

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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: _____ Date: 2/16/04 (954-764-8380)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Paul J. Kilgallon