

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

Change of Address
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 04 FEB 17 PM 12:46

DOCUMENT # A03000000968	
1. Entity Name PHASE ONE-DRP, LTD.	
Principal Place of Business 2998 FAU BLVD., STE. 307 BOCA RATON, FL 33431	Mailing Address 2998 FAU BLVD., STE. 307 BOCA RATON, FL 33431
2. Principal Place of Business	3. Mailing Address



3701 FAU Boulevard, Suite 205
Boca Raton, FL 33431

01082004 Chg-LP CR2E003 (10/03)

4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MACLAREN, LINDA O OSBORNE & OSBORNE, P.A. 798 SOUTH FEDERAL HWY., STE. 100 BOCA RATON, FL 33432		7. Name and Address of New Registered Agent Name: <u>Thomas A. Head</u> <u>3701 FAU Boulevard, Suite 205</u> <u>Boca Raton, FL 33431</u> Zip Code: _____	
8. The above named entity submits this statement for the purpose of changing its registered agent.		familiar with, and accept	
SIGNATURE: <u>[Signature]</u> Signature, typed or printed name of registered agent and title if applicable		DATE: <u>Thomas A. Head 1/26/04</u>	
9. Capital Contributions as Shown on record: \$500.00	10. Amount of Capital Contributions in FLORIDA to date.		

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	P03000073279 PHASE ONE-DRP DEVELOPMENT, INC. 3998 FAU BLVD., STE. 307 BOCA RATON, FL 33431	STREET ADDRESS CITY-ST-ZIP	<u>3701 FAU Boulevard, Suite 205</u> <u>Boca Raton, FL 33431</u>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	<u>300029806773</u> <u>03/03/04--01039--001 **158.75</u>
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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] Thomas A. Head 1/26/04 54-347-6915
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #