


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

FILED

2004 APR 23 PM 3: 56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # A03Q00001171</b> 1. Entity Name <b>WESTSIDE OF PLANTATION, LTD.</b>					
Principal Place of Business <b>300 S. PINE ISLAND RD., STE. 110          PLANTATION, FL 33324</b>			Mailing Address <b>300 S. PINE ISLAND RD., STE. 110          PLANTATION, FL 33324</b>		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address Suite, Apt. #, etc. City & State Zip		4. FEI Number <b>05=0584055</b>	
Country		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b> <b>FISCHER, STEVEN P</b> <b>300 S. PINE ISLAND RD., STE. 110</b> <b>PLANTATION, FL 33324</b>				<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				DATE	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE	
9. Capital Contributions as Shown on record. <b>\$0.00</b>		10. Amount of Capital Contributions in FLORIDA to date.		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 #	L03000030442		STREET ADDRESS		
NAME	WESTSIDE OF PLANTATION (GP), LLC		CITY-ST-ZIP		
STREET ADDRESS	300 S. PINE ISLAND RD., STE. 110		STREET ADDRESS		
CITY-ST-ZIP	PLANTATION, FL 33324		CITY-ST-ZIP		
DOCUMENT #			STREET ADDRESS	900035796629	
NAME			CITY-ST-ZIP	05/10/04--01031--003 **88.75	
STREET ADDRESS			STREET ADDRESS	900035796629	
CITY-ST-ZIP			CITY-ST-ZIP	05/10/04--01031--004 **52.50	
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
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CITY-ST-ZIP			CITY-ST-ZIP		



03242004 Chg-LP CR2E003 (10/03)

4. FEI Number 05=0584055 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

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

9. Capital Contributions as Shown on record. \$0.00

10. Amount of Capital Contributions in FLORIDA to date.

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 # L03000030442

NAME WESTSIDE OF PLANTATION (GP), LLC

STREET ADDRESS 300 S. PINE ISLAND RD., STE. 110

CITY-ST-ZIP PLANTATION, FL 33324

DOCUMENT #

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CITY-ST-ZIP

DOCUMENT #

NAME

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: \_\_\_\_\_

Steven P. Fischer

3/24/04

(954) 370-0300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE