

**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2004**

**DOCUMENT # A03000001270**

1. Entity Name

MAHAFFEY ASSOCIATES BRADENTON, LLLP



Principal Place of Business

3700 POMPANO DR. SE  
ST PETERSBURG FL 33705

Mailing Address

3700 POMPANO DR. SE  
ST PETERSBURG FL 33705

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

☒ 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

BRADENTON GENERAL PROPERTY, LLC  
731 JAMESTOWN DR.  
WINTER PARK FL 32792

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 typed or printed name of registered agent and file # applicable

DATE

9. Capital Contributions  
as Shown on record

\$2,600,000.00

10. Amount of Capital Contributions  
in FLORIDA to date

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

**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 #	NAME	STREET ADDRESS	CITY - ST - ZIP
L03000032891	BRADENTON GENERAL PARTNER, LLC	731 JAMESTOWN DR.	WINTER PARK FL 32792

13. ADDRESS CHANGES ONLY

STREET ADDRESS	CITY - ST - ZIP

000000159445  
05/07/04-80022-008 526.25

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

04-28-04

Date

407-677-0650

Daytime Phone #

STAPLE CHECK HERE