

2004 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A03000001316

FILED
Jan 07, 2004
Secretary of State

Entity Name: TRISHA TEN BROECK INSURANCE AGENCY, LTD.

Current Principal Place of Business:

1946 N.E. 5TH AVENUE
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

1946 N.E. 5TH AVENUE
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 20-0200285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROECK-CONO, TRISHA TEN
1946 N.E. 5TH AVENUE
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Capital Contributions as Shown on record: 99.00

Amount of Capital Contributions in Florida to date: 99.00

GENERAL PARTNER INFORMATION:

ADDRESS CHANGES ONLY:

Document #:

Name: TRISHA TEN BROECK INSURANCE AGENCY, INC.

Address: 1946 N.E. 5TH AVENUE

City-St-Zip: BOCA RATON, FL 33431

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: TRISHA TENBROECK CONO

GP

01/07/2004

Electronic Signature of Signing General Partner

Date