

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

DOCUMENT # A03000001320

1. Entity Name
LIGHTHOUSE POINTE PROJECT PARTNERSHIP, LTD.



FILED
JUN 14 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
C/O GREENSPOON, MARDER ET AL
135 WEST CENTRAL BLVD., SUITE 110
ORLANDO, FL 32801

Mailing Address
C/O GREENSPOON, MARDER ET AL
135 WEST CENTRAL BLVD., SUITE 110
ORLANDO, FL 32801



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

06112004 Chg-LP CR2E003 (10/03)

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

GRAY, N. DWAYNE JR., ESQ
C/O GREENSPOON, MARDER ET AL
135 WEST CENTRAL BLVD., SUITE 110
ORLANDO, FL 32801

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

DATE

9. Capital Contributions
as Shown on record. **\$1,000.00**

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

DOCUMENT # P03000099654
NAME LIGHTHOUSE POINTE GENERAL PARTNER, INC.
STREET ADDRESS 135 WEST CENTRAL BLVD., SUITE 1100
CITY-ST-ZIP ORLANDO, FL 32801

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

700037944537

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

6-11-04

Date

407-425-6559

Daytime Phone #

STAPLE CHECK HERE



CORPORATION SERVICE COMPANY

A030000061320

ACCOUNT NO. : 072100000032

REFERENCE : 737223 5011958

AUTHORIZATION :

Patricia Figueira

COST LIMIT : \$ 150.50

FILED
JUN 14 PM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : June 10, 2004

ORDER TIME : 12:07 PM

ORDER NO. : 737223-010

CUSTOMER NO: 5011958

CUSTOMER: Ms. Debra A. Hanley
Greenspoon Marder Hirschfeld
Suite 1100, 135 West Central
Blvd South Trust Bank Building
Orlando, FL 32801

550.00
MR

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TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: LIGHTHOUSE POINTE PROJECT
PARTNERSHIP, LTD.

RECEIVED
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd-EXT#2940

EXAMINER'S INITIALS: _____