


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 04 APR 13 PM 1:04

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| DOCUMENT # A03000001463 1. Entity Name WILLOW LAKE APARTMENTS, LLLP |  |
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| Principal Place of Business 1555 PALM BEACH LAKES BLVD., STE. 1100 WEST PALM BEACH, FL 33401 | Mailing Address 1555 PALM BEACH LAKES BLVD., STE. 1100 WEST PALM BEACH, FL 33401 |
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|--------------------------------|---------------------|-------------|
| 2. Principal Place of Business | 3. Mailing Address | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | |
| City & State | City & State | |
| Zip | Country | Zip Country |



02112004 Chg-LP CR2E003 (10/03)

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| 4. FEI Number 65-1207464 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent WILLOW LAKE OPERATING, LLC 1555 PALM BEACH LAKES BLVD., STE. 1100 WEST PALM BEACH, FL 33401 | 7. Name and Address of New Registered Agent Name E. Llwyd Ecclestone Street Address (P.O. Box Number is Not Acceptable) 1555 Palm Beach Lakes Blvd #1100 Suite 1100 City West Palm Beach FL Zip Code 33401 |
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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 

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| 9. Capital Contributions as Shown on record. \$1,144,737.28 | 10. Amount of Capital Contributions in FLORIDA to date. \$1,144,737.28 | DATE |
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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 # L03000037164 NAME WILLOW LAKE OPERATING, LLC STREET ADDRESS 1555 PALM BEACH LAKES BLVD., STE. 1100 CITY-ST-ZIP WEST PALM BEACH, FL 33401 | STREET ADDRESS CITY-ST-ZIP |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | STREET ADDRESS CITY-ST-ZIP |
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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

WILLOW LAKE OPERATING, LLC
SIGNATURE: BY: Ron Cooper  **4/1/04** **561/686-2000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE