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

DOCUMENT # A0300001495				FILEU			
1. Entity Name PREMIER MILLWORK OF FLORIDA, LTD.				2004	MAY I I	PM 12: 4.6	
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Principal Place of Business Mailing Address		1		7ΔI	JU OL POK	PORATIONS , FLORIDA	
3470 CLUB CENTER BOULEVARD NAPLES, FL 34114	•	3470 CLUB CENTER BOULEVARD NAPLES, FL 34114		776	-MINJOEE	, FLUKIDA	
Principal Place of Business     3. Mailing Address		S					
Suite, Apt. #, etc.	Suite, Apt. #, etc.			01072004 Chg-l	-P CF	32E003 (10/03)	
City & State	City & State		4. FEI Number	50494	Applied For Not Applicable		
Zip Country	Zip	Zip Country		5. Certificate of Status I	Desired 🙇	\$8.75 Additional Fee Required	
Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
WOODWARD, MARK J			Name				
3200 TAMIAMI TRAIL N. (SUITE 200) NAPLES, FL 34103			Street Address (P.O. Box Number is Not Acceptable)				
			City				
The share of about 19 and 19 a		register-		ad agent or hoth in the C		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.							
9. Capital Contributions as Shown on record. \$7,500.00 as Shown on record. \$7,500.00							
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						<u> </u>	
DOCUMENT # P03000117764 NAME PREMIER MILLWORK OF FLORIDA, INC.		STREE	ET ADDRESS		_		
STREET ADDRESS 3470 CLUB CENTER BOULEVARD CITY-ST-ZIP NAPLES, FL 34114		CITY-	-ST-ZIP		_		
DOCUMENT   NAME	STF		ET ADORESS	000036068860 05/11/0401080020 **535.00			
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DOCUMENT #		STREI	ET AODRESS				
* STREET ADDRESS  CITY-ST-ZIP			-ST-ZIP	***************************************	_		
14. I hereby certify that the information supplied with this filling 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 exempt this report as temping by Chapter 620, Florida Statutes							
SIGNATURE: 9 May 1 / Ond 4/15/04 (239) 732-9400							
Anthony DiNardo, as Vice President							