

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

APPROVED
 AND
 FILED

04 MAY -6 PM 4:25

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # A03000001681 1. Entity Name HARBOUR WALK INVESTMENT LIMITED PARTNERSHIP																			
Principal Place of Business 6700 CASA GRANDE WAY DELRAY BEACH, FL 33446		Mailing Address 6700 CASA GRANDE WAY DELRAY BEACH, FL 33446																	
2. Principal Place of Business Suite, Apt. #, etc. 		3. Mailing Address 4815 E. BUSCH BLVD. SUITE 208																	
City & State 		City & State TAMPA, FL																	
Zip 	Country 	Zip 33617	Country USA																
6. Name and Address of Current Registered Agent STEINBERG, LAWRENCE B 700 S. FEDERAL HIGHWAY, SUITE 200 DELRAY BEACH, FL 33446		7. Name and Address of New Registered Agent Name DAVID GORDON Street Address (P.O. Box Number is Not Acceptable) OWNERS PROPERTY MANAGEMENT 4815 E. BUSCH BLVD., SUITE 208 TAMPA FL 33617																	
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 DAVID GORDON, AGENT																			
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 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">DOCUMENT #</td> <td>P03000142280</td> </tr> <tr> <td>NAME</td> <td>HARBOUR WALK GP INC.</td> </tr> <tr> <td>STREET ADDRESS</td> <td>6700 CASA GRANDE WAY</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DELRAY BEACH, FL 33446</td> </tr> </table>		DOCUMENT #	P03000142280	NAME	HARBOUR WALK GP INC.	STREET ADDRESS	6700 CASA GRANDE WAY	CITY-ST-ZIP	DELRAY BEACH, FL 33446	13. ADDRESS CHANGES ONLY <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>200037564652</td> </tr> <tr> <td>STREET ADDRESS</td> <td>06/02/04-01008-004 **141.25</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		STREET ADDRESS		CITY-ST-ZIP	200037564652	STREET ADDRESS	06/02/04-01008-004 **141.25	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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/29/04 813-287-1078

STAPLE CHECK HERE