

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 AUG -4 AM 11:16

CR 08/05/04

100037924201
06/14/04--01010--008 **526.25



01192004 Chg-LP CR2E003 (10/03)

4. FEI Number **20-0484449** Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DOCUMENT # A03000001694	
1. Entity Name GB HOTEL HOLDINGS, LTD.	



Principal Place of Business 3250 MARY ST, STE 501 MIAMI, FL 33133	Mailing Address 3250 MARY ST, STE 501 MIAMI, FL 33133
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc. SUITE 500		Suite, Apt. #, etc. SUITE 500	
City & State		City & State	
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent	
STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON, P.A.-RICHARD E SCHATZ 150 W FLAGLER ST, STE 2200 MIAMI, FL 33130	

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

9. Capital Contributions as Shown on record. \$1,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$264,848
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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 # NAME STREET ADDRESS CITY-ST-ZIP	P96000089474 KEY RESORT, INC. 3250 MARY ST, STE 501 MIAMI, FL 33133	STREET ADDRESS	
		CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P02000133213 GB (KEY BISCAVNE) CORPORATION 3250 MARY ST, STE 501 MIAMI, FL 33133	STREET ADDRESS	
		CITY-ST-ZIP	
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		CITY-ST-ZIP	
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		CITY-ST-ZIP	

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: **KEY RESORT INC. SHERIDAN M. WEISER** **1/26/2004 305-445-2493**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE