

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 APR 30 PM 12:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # A03000001752 Entity Name ROBUCK VENTURES, LLLP	
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Principal Place of Business 610 EAST MAIN ST LEESBURG, FL 34748	Mailing Address 610 EAST MAIN ST LEESBURG, FL 34748
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State Zip	City & State Zip
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02252004 Chg-LP CR2E003 (10/03)

4. FEI Number 81-0640024	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ROBUCK, H.D. JR. 610 EAST MAIN ST LEESBURG, FL 34748	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$3,000,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$1,415,850.00	\$526.25
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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 #	ROBUCK, H.D. TRUSTEE	STREET ADDRESS	
NAME	9345 SILVER LAKE DR	CITY-ST-ZIP	
STREET ADDRESS	LEESBURG, FL 34748		
CITY-ST-ZIP			
DOCUMENT #	ROBUCK, H.D. JR.	STREET ADDRESS	600036486926
NAME	610 EAST MAIN ST	CITY-ST-ZIP	05/17/04--01010--006 **526.25
STREET ADDRESS	LEESBURG, FL 34748		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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: H. D. Robuck, Jr. **G.P.** 02/25/04 **(352) 326-3455**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #