

2004 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2004

DOCUMENT # A03000001777

1. Entity Name  
JPSB LIMITED PARTNERSHIP



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 MAR 26 AM 8:34

Principal Place of Business  
751 PARK OF COMMERCE DRIVE, SUITE 128  
BOCA RATON, FL 33487

Mailing Address  
751 PARK OF COMMERCE DRIVE, SUITE 128  
BOCA RATON, FL 33487



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02052004

Chg-LP

CR2E003 (10/03)

City & State

City & State

4. FEI Number

59-3774687

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COLMAN, NANCY B  
150 EAST PALMETTO PARK ROAD, SUITE 750  
BARITZ & COLMAN, LLP  
BOCA RATON, FL 33432

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

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

DATE

9. Capital Contributions  
as Shown on record. \$100.00

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  
DOCUMENT # P03000115171  
NAME JPSB HOUSING CORP.  
STREET ADDRESS 751 PARK OF COMMERCE DRIVE, SUITE 128  
CITY-ST-ZIP BOCA RATON, FL 33487

13. ADDRESS CHANGES ONLY  
STREET ADDRESS  
CITY-ST-ZIP 700032723107  
04/14/04 01021-003 \*\*150.00

DOCUMENT #  
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STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/15/04

Date

561-982-7770

Daytime Phone #

STAPLE CHECK HERE