


**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004**

FILED

**Mar 08, 2004 08:00 AM
Secretary of State**

DOCUMENT # A03000001847		
1. Entity Name BRIGHTWOOD ADVISORS LIMITED PARTNERSHIP		

Principal Place of Business 2775 SADDLEWOOD LANE PALM HARBOR FL 34685	Mailing Address 2775 SADDLEWOOD LANE PALM HARBOR FL 34685
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E003 (11/03)

4. FEI Number		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent STEFURAK, FRANCIS 2775 SADDLEWOOD LANE PALM HARBOR FL 34685		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. \$790,878.93	10. Amount of Capital Contributions in FLORIDA to date. 39500.00	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 #	F44518	STREET ADDRESS	
NAME	WATER'S EDGE MANAGEMENT CO., INC. ✓	CITY-ST-ZIP	
STREET ADDRESS	2775 SADDLEWOOD LANE	STREET ADDRESS	000000090077
CITY-ST-ZIP	PALM HARBOR FL 34685	CITY-ST-ZIP	03/17/04-80002-004 526.25
DOCUMENT #		STREET ADDRESS	
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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: *Water's Edge Management Co. Inc. Francis C. Stefurak General Partner* **3/2/04 773-0415**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE