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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Florida Capital Apartments - 2004, Ltd. (Name of Limit	ed Partnership)		_
The enclosed Supplemental Affidavit and fee(s) are submit	•		
Please return all correspondence concerning this matter to	the following:		
C. Thomas Selby	Person)	<u>.</u>	
Florida Capital Apartments - 2004, Ltd.	e e e e e e e e e e e e e e e e e e e		
(Firm/Co	mpany)		0
300 International Parkway, Suite 130 (Addi	ress)	LEAHI	5 JE
Heathrow, FL 32746 (City/State an	nd Zin Code)	ARY OF	9 1
For further information concerning this matter, please call:		FLORIDA	2:0
(Name of Person)	at ( <u>407</u> ) <u>333</u> - (Area Code & Daytim	1604 e Telephone Nu	mber)
STREET ADDRESS.	MAILING ADDR	ESS:	

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FLORIDA LIMITED PARTNERSHIP

The undersigned	general partner	s of		
Florida Capital Ap		, Ltd. ecuted this supplemental affid	lovit filed numer	, a
Florida Statutes.	rarmersmp, ex	ecuted this supplemental artic	avn med parsu	ant to section 620.112,
The total amount	t of the capital c	ontributions of the limited par	tners is: \$ <u>16,0</u>	
This <u>3rd</u> da	ay of	June	, 2005	<b></b> : .
FURTHER AF	FIANT SAYET	H NOT.		
Under penalties best of my knowl		clare that I have read the fore	going and that i	the facts are true, to the
		General Partner(s)		
	FCLC Apartm	nents 2004, DLC		Z S
	By:	Con &	9_	05 JUN -9 SECRETARY ALLAHASSE
	C. Thomas S	elby		
		7	<del></del> -	OF STA
		Fees:  per \$1000, based on additional  contributions  inimum \$ 52.50		DA DI
		avimum \$1750.00	ì	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314