2005 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2005**

FII ED DOCUMENT # A0400001257 2005 APR 26 PH 12: 31 VESTCOR EXECUTIVE PARTNERSHIP 2004, LLLP SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 3020 HARTLEY ROAD STE. 300 3020 HARTLEY ROAD STE. 300 JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32257 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02282005 Chg-LP CR2E003 (10/03) City & State City & State 4. FEI Number Applied For 20-2073213 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MORGAN, WILLIAM L 3020 HARTLEY ROAD STE. 300 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE, FL 32257 City 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. 80005<u>4342</u>228 SIGNATURE 05/12/05 - 01071 Signature, typed or printed name of registered agent and title it applicable. 9. Capital Contributions 10. Amount of Capital Contributions \$7,500.00 as Shown on record. 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. GENERAL PARTNER INFORMATION 12. 13 ADDRESS CHANGES ONLY P98000033302 DOCUMENT # STREET ADORESS VESTCOR, INC. STREET ADDRESS 3020 HARTLEY ROAD STE. 300 CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE, FL 32257 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Mark T. Farrell

April 21, 2005

(904) 260-3030