2008 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2008

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SIGNATURE:

FILED Mar 12, 2008 08:00 A Secretary of State DOCUMENT # A04000001302 CRYSTAL LAKE 2004, LTD. Principal Place of Business 600 E. COLONIAL DRIVE, SUITE 100 600 E. COLONIAL DRIVE, SUITE 100 ORLANDO FL 32803 ORLANDO FL 32803 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E003 (10/07) Applied For City & State City & State 4. FEI Number 20-1506627 Not Applicable Ζıρ Country Zφ 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 SCHRIMSHER, J. STEVEN Street Address (P.O. Box Number is Not Acceptable) 600 E. COLONIAL DRIVE, SUITE 100 ORLANDO FL 32803 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. Signature, typed or printed name of registered agent and of air applicable FILE NOW!!! Fee is \$500. *** After May 1, 2008, fee will be \$900. *** Make check payable to Florida Department of State. 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. ADDRESS CHANGES ONLY DOCUMENT (P96000086295 STREET ADDRESS SCHRIMSHER INVESTMENTS CORPORATION NAME STREET ADDRESS 600 E. COLONIAL DRIVE, SUITE 100 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32803 DOC€MENT # UDD000855737 STREET ADDRESS NAME: /27/00_00051-021 500.00 STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP DOCHMENT # STREET ADDRESS NAME STREET AUDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ANDRESS NAME STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS MAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. Infurther 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

· Steven Schrimsher

DIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER