

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

APPROVED  
 AND  
 FILED

04 MAY -4 PM 4:51

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT # A04585**

1. Entity Name  
 OLD HOUSE LTD.



Principal Place of Business  
 770 E. PALMETTO PARK RD.  
 BOCA RATON, FL 33432

Mailing Address  
 770 E. PALMETTO PARK RD.  
 BOCA RATON, FL 33432



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03122004

Chg-LP

CR2E003 (10/03)

City & State

City & State

4. FEI Number

59-1660900

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

CAROLYN G. PICOT  
 5000 NORTH OCEAN BLVD., APT. 911  
 FORT LAUDERDALE, FL 33308

Name CAROLYN G. PICOT

Street Address (P.O. Box Number is Not Acceptable)  
 1700 S. Ocean Blvd., #8B

City LAUDERDALE BY THE SEA

FL

Zip Code 33062

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. \$69,000.00

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 #  
 NAME PICOT, CAROLYN  
 STREET ADDRESS 1700 S. OCEAN BLVD., #8B  
 CITY-ST-ZIP LAUDERDALE BY THE SEA, FL 33062

13. ADDRESS CHANGES ONLY

STREET ADDRESS  
 CITY-ST-ZIP 000036547460  
 05/18/04--01041--004 \*\*526.25

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:

*Carolyn G. Picot*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3.25.04 561.361.6708

Date

Daytime Phone #