


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
May 06, 2004 08:00 AM
Secretary of State

DOCUMENT # A05045

1. Entity Name
DON CARTER'S KENDALL LANES LIMITED



Principal Place of Business Mailing Address

13600 N. KENDALL DR.
 MIAMI, FL 33186 1389 N.W. 136TH AVENUE
 SUNRISE, FL 33323



2. Principal Place of Business 3. Mailing Address

Suite, Apt #, etc Suite, Apt #, etc

04122004 Chg-LP CR2E003 (10/03)

City & State City & State

4. FEI Number Applied For

59-1685038 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STRICKROOT, JOHN C
25 W. FLAGLER ST.
5TH FLOOR, CITY NATIONAL BANK BLDG.
MIAMI, FL 33130

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 **\$930,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **\$ 930,000.00**

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 # | NAME | STREET ADDRESS | |
| | POWELL, JOHN JR. | | |
| STREET ADDRESS | 6639 EMBASSY COURT | CITY - ST - ZIP | |
| CITY - ST - ZIP | MAUMEE, OH | | 000000159991 |
| DOCUMENT # | NAME | STREET ADDRESS | |
| | ROSE, BURTON | | 05/13/04-90003-021 526.25 |
| STREET ADDRESS | 5580 MONROE ST. | CITY - ST - ZIP | |
| CITY - ST - ZIP | SYLVANIA, OH | | |
| DOCUMENT # | NAME | STREET ADDRESS | |
| | ISAN, JERRY | | |
| STREET ADDRESS | 2420 N.E. 27TH STREET | CITY - ST - ZIP | |
| CITY - ST - ZIP | LIGHTHOUSE POINT, FL | | |
| DOCUMENT # | NAME | STREET ADDRESS | |
| | | | |
| STREET ADDRESS | | CITY - ST - ZIP | |
| CITY - ST - ZIP | | | |
| DOCUMENT # | NAME | STREET ADDRESS | |
| | | | |
| STREET ADDRESS | | CITY - ST - ZIP | |
| CITY - ST - ZIP | | | |

STAPLE CHECK HERE

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: X *Jerry Isan* **Jerry Isan X** 4-24-04 (954)846-8400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #