2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

Due By May 1, 2004					FILED			
DOCUMENT # A05266 1. Entity Name CALIFORNIA FIRST, LTD.				2004 APR 22 PM 3: 48 SECRETARY OF STATE TALLAHASSEE, FLORIDA				
Principal Place of Business Mailing Address 3945 FREEDOM CIR. 3945 FREEDOM CIR. SUITE 640 SUITE 640 SANTA CLARA, CA 95054 SANTA CLARA, CA 95054			6054				P4SIX S1814 S1SIX	
Principal Place of Business 3. Mailing Add		3. Mailing Address	S					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01152004	Chg-LP	CR2E003	3 (10/03)	
City & State		City & State		4. FEI Number 59-17078	304		Applied For Not Applicable	
Zip :	Country Zip C		Cour	ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required			8.75 Additional
	6. Name and Address of Current	Registered Agent			7. Name and A	ddress of New Re	gistered Ag	ent
DARACOR	P INCORPORATED	Name						
236 EAST 6TH AVE. SUITE 204 TALLAHASSEE, FL 32303				Street Address (P.O. Box Number is Not Acceptable)				
				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								
Signature, typed or printed name of registered agent and title if applicable.								
9. Capital Contributions as Shown on record. \$635,600.00 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 13. ADDRESS CHANGES ONLY								
12.	12. GENERAL PARTNER INFORMATION DOCUMENT # GP0300000311			T T		ADDRESS CHA	INGES CINET	
NAME STREET ADDRESS CITY-ST-ZIP	MCCANDLESS PARTNERSHIP 3945 FREEDOM CIR., #640			Y-ST-ZIP			···-	
DOCUMENT #	SANTA CLARA, CA 95054							
NAME STREET ADDRESS				REET ADDRESS		100357 704-01031	7974 032	7/8 **267.51
DOCUMENT #			Cit	Y-ST-ZiP	 	1 00357 70401031	7974	70
NAME STREET ADDRESS			STI	REET ADDRESS	05/10/	'U4U1U31	033	**2b7.49
CITY-ST-ZIP			CIT	Y-ST-ZIP		 		
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DOCKMENT / NAME		ŧ	ŠTI	REET ADDRESS				
STREET ADDRESS CITY-ST-ZIP				Y-SI-ZIP		·		·····
14. I hereby certify that the information supplied with the 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 California First ITD, a Florida limited partnership By: McCandless Partnership, a California General partnership, General Partner SIGNATURE: By:								