

2004 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A05936

FILED
Apr 15, 2004
Secretary of State

Entity Name: BUENA VISTA PARTNERS, LTD.

Current Principal Place of Business:

1701 LEE ROAD, SUITE A
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1701 LEE ROAD, SUITE A
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-1692338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

M.D. CARLISLE CORP. OF FLORIDA
1701 LEE ROAD, SUITE A
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Capital Contributions as Shown on record: 246,250.00

Amount of Capital Contributions in Florida to date: 246,250.00

GENERAL PARTNER INFORMATION:

ADDRESS CHANGES ONLY:

Document #:

Name: FELDMAN ALTAMONTE LLC

Address: 1701 LEE ROAD, SUITE A

City-St-Zip: WINTER PARK, FL 32789

Address:

City-St-Zip:

Document #:

Name: PEARCE ALTAMONTE LLC

Address: 1350 AVENUE OF THE AMERICAS, SUITE 2808

City-St-Zip: NEW YORK, NY 10019

Address:

City-St-Zip:

Document #:

Name: M.D. CARLISLE CORP. OF FLORIDA

Address: 1701 LEE ROAD, SUITE A

City-St-Zip: WINTER PARK, FL 32789

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: JOHN GRANT

VP

04/15/2004

Electronic Signature of Signing General Partner

Date