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

## FILED Apr 27, 2004 08:00 AM Secretary of State

1. Entity Name	MENT # A07504 Vine associates, Ltd.			Secretary of State
Principal Place 1500 N.W. 16 GAINESVILLE	STH AVENUE	Mailing Address 1500 N.W. 16TH A' GAINESVILLE, FL 3		
2. Principal P	ace of Business	3. Mailing Address	<u></u>	
Suite, Apr. #, etc.		Suite, Apt. #, etc.		92182904 Chg-LP CR2E003 (10/03)
City & State		City & State		4. FEI Number Applied For 59-1838157 Not Applied be
Zip ,	Country	Zo	Country	5. Certificate of Status Desired See Required Fee Required
	6. Name and Address of Curren	t Registered Agent		7. Name and Address of New Registered Agent
MEIDORE MIRRAY H			Name	
NEIDORF, MURRAY H 1500 N.W. 16TH AVE. GAINESVILLE, FL 32605			Street Address	(P.O. Bux Number is Not Acceptable)
			City	Zin Code
8. The above	named entity submits this statement	or the purpose of changin	g its registered office or regist	ered agent, or both, in the State of Florida. I am familiar with, and accept
	ons of registered agent.			
SIGNATURE -	Signature, typed or printed name of registered age	if and title if applicable		DATE
9. Capital Cor as Shown o		10. Amount of C in FLORIDA	apital Contribution \$525	,000
	A GENERAL PARTNER	THAT IS A BUSINESS	ENTITY MUST BE REGIS	STERED AND ACTIVE WITH THIS OFFICE.
12.	GENERAL PARTNI		ine iorin; an amenume	ent must be filed to change a general partner.  ADDRESS CHANGES ONLY
DOCUMENT #			STREET ADDRESS	
NAME STREET ADDRESS CTY-ST-ZIP	NEIDORF, MURRAY H 9720 WILSHIRE BLVD, 3RD F BEVERLY HILLS, CA 90212		City-SI-ZiP	
DOCUMENT /		· · · · · · · · · · · · · · · · · · ·	GTREET ADDRESS	
STREET ADDRESS			CATA - 215	05/03/04-80090-025 526.25
DOCUMENT #			STREET ADDRESS	03/04/07/50000 000/00010
name Street address City - St - Zip			CITY-ST ZIF	<u></u>
DOCUMENT #			STALL ADDRESS	<u> </u>
name Street address Cify-SF-Zip			CHY SI AP	
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DOCUMENT #		<u>/</u>	STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	
14. Thereby o	entity that the information supplied with on this report is true and accurate an er or trustee empowered to execute to	d that my signature shall h	ave the same legal effect as if	Section 119.07(3)(i). Florida Statutes. I further certify that the information made under oath, that I am a General Partner of the limited partnership o
SIGNAT	URE:	1 A/11c	rolpy.	3/4/04
	SIGNATURE AND TYPED	r printed name of Signing Gi	ENERAL PARTNER	ORIGINAL