

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 APR 27 PM 3:43

DEPT. OF REVENUE
 TALLAHASSEE, FLORIDA
ENTERED

MJH

DOCUMENT # A16635	
1. Entity Name RAINTREE LTD.	

Principal Place of Business 2638-5 STATE RD. 21 MELROSE, FL 32666	Mailing Address P.O. BOX 186 MELROSE, FL 32666
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country



03162004 Chg-LP CR2E003 (10/03) **4/27**

6. Name and Address of Current Registered Agent CONDOR PROPERTY MANAGEMENT, INC. 2638-5 STATE RD. 21 MELROSE, FL 32666	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

4. FEI Number
59-2303410

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

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 _____

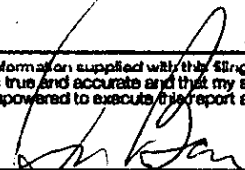
9. Capital Contributions as Shown on record **\$100,000.00** 10. Amount of Capital Contributions in FLORIDA to date

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	G92366001683	STREET ADDRESS	
NAME	KORDEX ENTERPRISES	CITY-ST-ZIP	400036931794
STREET ADDRESS	2638-5 STATE RD. 21		05/19/04--01049--027 **158.75
CITY-ST-ZIP	MELROSE, FL 32666		400036931794
			05/19/04--01049--028 **376.25
DOCUMENT #		STREET ADDRESS	
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STREET ADDRESS			
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:  **3/29/04** **352-975**
 SIGNATURE AND TYPED OR PRINTED NAME OF BONDING GENERAL PARTNER **9326**