2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004

STAPLE CHECK HERE

DUE BY MAY 1, 2004				FILED
DOCUMENT # A17678  1. Entity Name  APEX PROPERTIES, LTD.				Apr 09, 2004 08:00 AM Secretary of State
Principal Plac	e of Business	Mailing Address		-
10605 ILEX TAMPA FL 3		10605 ILEX STREET TAMPA FL 33618		
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #. etc.		MOORE CR2E003 (11/03)
City & State		City & State		4. FEI Number 59-2436946 Applied For Not Applicable
Zsp	Country	Zip	Country	5. Certificate of Status Desired See Required Fee Required
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent	
EVANS, THOMAS P			Name	
10605 ILEX STREET TAMPA FL 33618			Street Address	(P.O. Box Number is Not Acceptable)
1AWFA 1 E 33010				
		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 Signature, typed or garded name of registated agent and title if approachie				
9. Capital Contributions \$900,000.00 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STA in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION				
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 filled to change a general partner.  12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY				
DOCUMENT #	EVANS FARMS, INC		STREET ADDRESS	
NAME STREET ADDRESS			0001 67 70	
CITY - ST - ZIP	TAMPA FL 33618	<u> </u>	CITY-ST-ZIP	U00000114968
DOCUMENT # NAME			STREET ADDRESS	04/16/04-80005-012 526.25
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	
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STREET ADDRESS CITY - ST - ZIP			CITY+ST-ZIP	
DOCUMENT / NAME			STREET ADORESS	
STREET ADDRESS CITY-SI-ZIP			CHY-ST-ZIP	
DOCUMENT #			STREET ADDRESS	**************************************
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	
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				

El Ans Farens Inc

SIGNATURE: Ly Hans France For Stand - Proper - The Wild S REVONS - 4/5/04 - (813) 932 - 2898

SIGNATURE: Ly Hans of France For Standing General Partner

Date Constitute and Typed On Printed Name OF SIGNING GENERAL PARTNER