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

## FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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DOCUMENT #	‡A18124	

1. Entity Name VISTA LIMITED



Mailing Address

3. Mailing Address

P.O. BOX 620365 ORLANDO, FL 32862

Principal Place of Business

P.O. BOX 620365 ORLANDO, FL 32862

2. Principal Place of Business

Zip

Suite, Apt. #, etc.

Suite, Apt. #, etc. City & State City & State

Country

Zip

Country

01062004

5. Certificate of Status Desired

Chg-LP

--7. Name and Address of New Registered Agent ----

CR2E003 (10/03)

Applied For Not Applicable

\$8.75 Additional Fee Required

-- 6.- Name and Address of Current Registered Agent -

LEE, RICHARD T 7050 AUGUSTA NATIONAL DR. ORLANDO, FL 32822

Name

Street Address (P.O. Box Number is Not Acceptable)

4. FEI Number

59-2469626

Zip Code

DATE

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 \$985.00 as Shown on record.

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 H20996 DOCUMENT # STREET ADDRESS NAME LEE PROPERTIES, INC. STREET ADDRESS 7050 AUGUSTA NAT'L DRIVE CITY - ST- ZIP CITY-ST-ZIP ORLANDO, FL DOCUMENT **#** STREET ADDRESS 700027521897 01/23/04--01053--015 NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 16

14. I hereby certify that the information supplied with this filling 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 the report as required by Chapter 620. Florida Statutes I in the receiver or trustee empowered to execute the report as required by Chapter 620. Florida Statutes I in the receiver or trustee empowered to execute the report as required by Chapter 620. Florida Statutes I in the receiver or trustee empowered to execute the report as required by Chapter 620. Florida Statutes I in the receiver of the limited partnership or

Lee Properties; Inc. General Partner

Richard T. I.

1-08-2004

407-857-2835

SIGNATURE: