

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

141.25

DOCUMENT # A22878	
1. Entity Name THE CROSSINGS OF ORLANDO, LTD.	



**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

04 MAR 12 PM 12:38

Principal Place of Business 701 BRICKELL AVE. SUITE 1400 MIAMI FL 33131	Mailing Address 701 BRICKELL AVE. SUITE 1400 MIAMI FL 33131
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MOORE CR2E003 (11/03)

2. Principal Place of Business 703 Waterford Way		3. Mailing Address 703 Waterford Way	
Suite, Apt. #, etc. Suite 800		Suite, Apt. #, etc. Suite 800	
City & State Miami, FL		City & State Miami, FL	
Zip 33126	Country	Zip 33126	Country

4. FEI Number 59-2693103	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
PITTS, W. DOUGLAS 701 BRICKELL AVENUE SUITE 1400 MIAMI FL 33131

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	703 Waterford Way Suite 800
City	Miami FL
Zip Code	33126

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 _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$5,000.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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	
DOCUMENT #	M34390
NAME	LANCASTER DEVCORP, INC.
STREET ADDRESS	701 BRICKELL AVE. #1400
CITY-ST-ZIP	MIAMI FL
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	703 Waterford Way, Suite 800
CITY-ST-ZIP	Miami, FL 33126
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	800031671708
CITY-ST-ZIP	04/01/04--01014--014 **141.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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.

SIGNATURE: <u><i>Douglas H. Bridge</i></u>	3/3/04	305-261-4330
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Douglas H. Bridge		Daytime Phone #

STAPLE CHECK HERE