


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

**FILED**  
**Mar 19, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A23020</b> 1. Entity Name <b>THE BRADSHAW FAMILY LIMITED PARTNERSHIP</b>					
Principal Place of Business <b>22051 N. O'BRIEN ROAD</b> <b>HOWEY-IN-THE HILLS, FL 34737</b>			Mailing Address <b>P.O. BOX 547853</b> <b>ORLANDO, FL 32854-7853</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BRADSHAW, CHARLES E., JR. 22051 N. O'BRIEN RD HOWEY-IN-THE-HILLS, FL 34731				Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <div style="display: flex; justify-content: space-between;"><span><b>FL</b></span><span>Zip Code</span></div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small> <div style="float: right;">DATE _____</div>					
9. Capital Contributions as Shown on record. <b>\$0.00</b>			10. Amount of Capital Contributions in FLORIDA to date.		
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	BRADSHAW, CHARLES E. JR.		CITY-ST-ZIP		
STREET ADDRESS	22051 O'BRIEN ROAD				
CITY-ST-ZIP	HOWEY-IN-THE-HILLS, FL				
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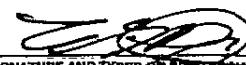


03032004    Chg-LP    CR2E003 (10/03)

4. FEI Number  
**59-2803567**    Applied For  
Not Applicable

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

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:**     **3/4/04**    **(352) 429-4145**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**Charles E. Bradshaw, Jr., General Partner**

Date    Daytime Phone #