2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # A24272

1. Entity Name
STADTLER ENTERPRISES, LTD.

Principal Place of Business	Mailing Address
748 EUREKA DR. VERSAILLES, KY 40383	748 EUREKA DR. VERSAILLES, KY 40383

04272004 Chg-LP CR2E003 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. # etc.		Suite, Apt. # etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 86-0532842 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HUTCHINS, DONALD 2067 SAXON BLVD. DELTONA, FL 32725	Name Street Address (P.O. Box Number is Not Acceptable) 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 ______________________ DATE
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record	10. Amount of Capital Contributions in FLORIDA to date	
$425,000.00	#196,326.00	4/27/04

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 #	G93019000038	STREET ADDRESS	
NAME	STADTLER, RICHARD AND MA.		
STREET ADDRESS	748 EUREKA DR.	CITY ST ZIP	
CITY ST ZIP	VERSAILLES, KY 40383		
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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: Margaret M Stadtler 4/27/04 859-873-2135
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

MARGARET M. STADTLER, TTEE
RICHARD & MARGARET STADTLER FAMILY TRUST B, GEN PTR