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

FILED Feb 09, 2004 08:00 AM Secretary of State

DOCUMENT # A25849  1. Entity Name TAMPA PLAZA IV COMPANY, LTD.							Secretary of State				
Principal Place of Business 8214 WESTCHESTER, 9TH FLOOR DALLAS, TX 75225		82	Mailing Address 8214 WESTCHESTER, 9TH FLOOR DALLAS, TX 75225								
2. Principal F	2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		s	Suite, Apt. #, etc.			01062004	Chg-LP	CR2E0	03 (10/03)		
City & State			City & State		4. FEI Number 75-2211		<u> </u>	Applied Not Ap	d For		
Zip			Zìp Coun		ntry	5. Certificate of Status Desired S8.75 Additional Fee Required			-		
	6. Name and Address of Current Registered Agent					7. Name and I	Address of New	Registered A	gent		
BEARD, R 100 N. TA SUITE 217 TAMPA, F	<b>'</b> 5				Name Street Address (	P.O. Box Number	is Not Acceptab	ie)	Zip Code		
8. The above the obliga	named entity submits this statementions of registered agent.	t for the pi	urpose of changing its	s register	ed office or register	red agent, or both	, in the State of F		amiliar with, and	accept	
							· <u> </u>	<u> </u>			
SIGNATURE Signature, typed or printed name of registered agent and the it applicable.  9. Capital Contributions as Shown on record.  \$62.50  10. Amount of Capital Contributions in FLORIDA to date.								T. DATE		<u>- 1,7 **</u>	
	A GENERAL PARTNE NOTE: General Partners	R THAT I	S A BUSINESS EI	NTITY M	IUST BE REGIST	FERED AND A	CTIVE WITH T	HIS OFFICE	tner.	. :	
12.	GENERAL PART			13.			ADDRESS CI				
DOCUMENT # NAME STREET ADDRESS	NAME COOPER, WILLIAM R.  STREET ADDRESS CITY-SI-ZP DALLAS, TX 75225			STR	EET ADDRESS		<u>.</u>		<u> </u>	÷ b	
CITY-SI-ZIP				CITY	-ST-ZIP		<u></u>	_ <del></del>	. 5		
DOCUMENT # NAME STREET ADDRESS	BEARD, RICHARD A., III 4417 BAYSHORE BLVD.				EET ADDRESS		<u> </u>	070850	<u>.</u>	<u>; ;   -  </u>	
DOCUMENT #	TAMPA, FL	-{			02/28/04-		0 <b>5 150 0</b> 0	<u> </u>			
NAME STREET ADDRESS				l	EET ADORESS	<u></u>					
CITY-ST-ZIP DOCUMENT #		<u> </u>		CHY	'-ST-2IP			<u> </u>	· · · · · ·	<u> </u>	
NAME STREET ADDRESS				1	EET ADDRESS					- ,	
CITY-ST-ZIP				CITY	'-S1-ZIP	·	·_			er r	
CITY-ST-ZIP  DOCUMENT A  NAME  STREET-NODRESS					-SI-ZIP	· · ·	<u> </u>	<u></u> _	•		
CITY-S#-ZIP  DOCUMENT #			<u>.                                      </u>					·=:	- mg- M-16 m ng - sa ar - s	**** * *****	
STREET ADDRESS CITY-ST-ZIP				CITY	-ST-ZIP			Carti de las c	·		
14. I hereby	certify that the information supplied on this report is true and accurate a ver or trustee empowered to explore	with this fill and that my this epor	ing does not qualify for signature shall have t as required by Char	or the exe	emption stated in Se e legal effect as if n Florida Statutes	nade under oath;	that I am a Gene	ral Partner of	ify that the inforn the limited partn	nation ership or	
SIGNAT	URE: SIGNATURE AND TYPE	OR PRINTE	NAME OF SIGNING GENER	RAL PARTNI	ER .	W1111an 2/6/04	n R. Coo	oper <del>360-18</del>	yume Phone #	·	