

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

FILED

04 MAY 17 PM 1:32

STATE
TALLAHASSEE FLORIDA

WJH

DOCUMENT # A25930

1. Entity Name
HIAWASSEE PROPERTIES, LTD.



Principal Place of Business
P.O. BOX 1685
NEW SMYRNA BEACH, FL 32170-1685

Mailing Address
P.O. BOX 1685
NEW SMYRNA BEACH, FL 32170-1685



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05032004

Chg-LP

CR2E003 (10/03)

5/17

City & State

City & State

4. FEI Number

59-2878153

Applied For

Not Applicable

Zip
32168

Country

Zip

Country

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

OSWALD, KENNETH F.
SUITE 110
600 COURTLAND STREET
ORLANDO, FL 32804

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

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

DATE

9. Capital Contributions
as Shown on record. \$250.00

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

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
EVANS, JERRY C.
P.O. BOX 1685
NEW SMYRNA BEACH, FL 321701685

STREET ADDRESS

CITY-ST-ZIP

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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:

Jerry C. Evans
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

JERRY C. EVANS

5/12/04

Date

Daytime Phone #

STAPLE CHECK HERE