2003 LIMITED PARTNERSHIP UNIFORM BUSINESS REPORT (UBR)

4		A	$\overline{\Delta}$	054
DOCU	MENT	# A	28	254

1. Entity Name PARKSIDE GARDEN ASSOCIATES, LTD.



Principal Place of Business 818 W BROOKS AVE

Mailing Address 818 W BROOKS AVE

NORTH LAS VEGAS	NV 89030	NORTH LAS VEGAS	NV 89030				
Principal Place of Business 3. Mailing Address							
Suite, Apt. #, etc	C	Suite, Apt. #, etc.		DUE BY MAY 1, 2003			
City & State	<u> </u>	City & State	<u>, </u>	· · · · · · · · · · · · · · · · · · ·	4. FEI Number 59-2917620		Applied For Not Applicable
Zip	Country	Zip	Coun	try	5. Certificate of Status Desired		75 Additional Required
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent					
MAYHOOD, LYNN 9951 ATLANTIC BLVD SUITE 440				Name Green Dotson Street Address (P.O. Box Number is Not Acceptable)			
JACKSONVILLE FL 32225			City Tarr	0 Lowry	FL Z	ip Code 33610	

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

9. Capital Contributions

as Shown on record.

typed or printed name of registered agent and title if applicable

\$0.00

10. Amount of Capital Contributions in FLORIDA to date.

03 HAY -2 PM 7:53

SECRETARY OF STATE TALLAHASSEE FLORIDA

11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

\$0.00 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

12.	GENERAL PARTNER INFORMATION	13.	ADDRESS CHANGES ONLY
DOCUMENT # NAME	BIRD, ALLAN S.	STREET ADDRESS	900017914009 05/02/0301106024 **150.00
	818 W BROOKS AVE NORTH LAS VEGAS NV 89030	CITY-ST-ZIP	
DOCUMENT # NAME	F93000001192 REAL PROPERTY SERV CORP	STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	818 W BROOKS AVE NORTH LAS VEGAS NV 89030	CITY-\$T-ZIP	
DOCUMENT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	`.
DOCUMENT # NAME		STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT # NAME	<u> </u>	STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP		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 mysignature 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:

SIAPLE CHECK HERE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

(702) 313-3700

Daytime Phone #

Signature Block:

Parkside Gardens Associates, Ltd.

a District of Columbia general partnership,

By: Real Property Services Corp., a Delaware corporation, general partner

Allan S. Bird, President