

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
May 04, 2004 08:00 AM
Secretary of State

DOCUMENT # A29486 1. Entity Name LAND INVESTMENT I, LTD.					
Principal Place of Business 201 W. FIRST STREET SANFORD, FL 32771			Mailing Address 201 W. FIRST STREET SANFORD, FL 32771		
2. Principal Place of Business Suite, Apt #, etc.			3. Mailing Address Suite, Apt #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEL Number 59-2990758	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NELSON, LARRY W. 201 WEST FIRST STREET SANFORD, FL 32771				7. Name and Address of New Registered Agent 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, applicable _____ DATE _____					
9. Capital Contributions as Shown on record \$1,423.80			10. Amount of Capital Contributions in FLORIDA to date. \$1,423.80		
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	G19604 HEATHROW LAND & DEV CORP 201 W. FIRST STREET SANFORD, FL 32771		STREET ADDRESS CITY ST ZIP		
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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: <i>Franklin Lapp</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER <i>115. Vice President</i> Date 4/27/04 Daytime Phone #					

STAPLE CHECK HERE



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