2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2004

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SIGNATURE:

Apr 06, 2004 08:00 AM Secretary of State DOCUMENT # A30957 1. Entity Name PELHAM-LACONIA DEVELOPERS LIMITED PARTNERSHIP Principal Place of Business Mailing Address 4182 LIVE OAK BLVD. DELRAY BEACH FL 33445 4182 LIVE OAK BLVD. DELRAY BEACH FL 33445 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E003 (11/03) City & State City & State 4. FEI Number Applied For 65-0235726 Not Applicable Ζιρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FELNER, JAY 4182 LIVE OAK BLVD. Street Address (P.O. Box Number is Not Acceptable) **DELRAY BEACH FL 33445** 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, typed or printed name of registered agent and title it applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions 11. MAKE CHECK PAYABLE TO FL, DEPT, OF STATE \$1,000.00 as Shown on record in FLORIDA to date. SEE REVERSE SIDE FOR FEE INFORMATION \$1,000.00 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 13. F92000000906 DOCUMENT # STREET ADDRESS RUG PROPERTIES CORP NAME 600 CENTRAL AVE., #365 STREET ADDRESS CITY-ST-ZIP 11000000105101 CITY ST-ZIE HIGHLAND PARK IL 60035 04/07/04 80010 013 141.25 DOCUMENT # STREET ADDRESS MANE STREET ADDRESS CHY-ST-ZP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY -ST - ZIP CITY-SI-78P DOCUMENT # STREET ADDRESS STREET ADDRESS CETY - ST - ZEP CITY-ST-ZIP DOCUMENT # STREET ADDRESS 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 by execute this report as regunded by Chapter 620, Florida Statutes

Robert U. Goldman, V.P.

3/22/2004

(847) 432-3666

Daytime Pt.one #

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