2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

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STAPLE CHECK

FILED 04 MAY -4 PH 5: 00 DOCUMENT # A31159 1. Entity Name OCALA MANUFACTURER'S MALL LIMITED SECRETARY OF STATE TALLAHASSEE, FLORIDA **PARTNERSHIP** Principal Place of Business Mailing Address %KONOVER & ASSOCIATES SOUTH, LLC %KONOVER & ASSOCIATES SOUTH, LLC 7000 WEST PALMETTO PARK ROAD, SUITE 408 7000 WEST PALMETTO PARK ROAD, SUITE 408 BOCA RATON, FL 33433 BOCA RATON, FL 33433 2. Principal Place of Business 3. Mailing Address 7000 West Palmetto Park Rd. 7000 West Palmetto Park Rd. Suite, Apt. #, etc. Suite 203 Suite, Apt. #, etc. 01082004 CR2E003 (10/03) Cha-LP Suite 203 City & State Boca Raton, FI City & State 4. FEI Number Applied For 65-0258829 Not Applicable Boca Raton, FL Country Country Zip \$8.75 Additional 33433 5. Certificate of Status Desired 33433 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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 10. Amount of Capital Contributions 9. Capital Contributions: \$325,000.00 as Shown on record." in ELOBIDA 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. 13. DOCUMENT# S00049 STREET ADDRESS 7000 West Palmetto Park Rd., Ste. 203 MANUFACTURER'S MALL OF OCALA, INC. NAME STREET ADDRESS 7000 W. PALMETTO PK RD. CITY-ST-ZIP Boca Raton, FL 33433 CITY-ST-ZIP BOCA RATON, FL DOCUMENT # STREET ADDRESS 000036546620 NAME 05/18/04--01035--023 STREET ADDRESS Ŋ. CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7/2 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 Manufacturer's Mall of Ocala, Inc., General Partner, By, its Executive Vice President, COO, Gregory V. Combs SIGNATURE: D TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

APPRUVE AND

Daytime Phone #