

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

APPROVED  
AND  
FILED

04 MAY -4 PM 4:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # A31833</b> 1. Entity Name <b>SESANE FERRARA INVESTMENT PARTNERSHIP AGREEMENT, A LIMITED PARTNERSHIP</b>	
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Principal Place of Business <b>7301 W. HARRISON FOREST PARK, IL 60130</b>	Mailing Address <b>7301 W. HARRISON FOREST PARK, IL 60130</b>
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



03262004 Chg-LP CR2E003 (10/03)

4. FEI Number <b>36-3011205</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>FERRARA, NELLO V. 354 CHARLEMAGNE BLVD., Unit E-204 NAPLES, FL 33962</b>	
7. Name and Address of New Registered Agent Name _____ Street Address (P.O.-Box Number is Not Acceptable) _____ City _____ <b>FL</b> 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 *Nello V. Ferrara*, Agent DATE \_\_\_\_\_

9. Capital Contributions as Shown on record. <b>\$80,000.00</b>	10. Amount of Capital Contributions in FLORIDA to date.
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**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 #	FERRARA, NELLO V.	STREET ADDRESS	
NAME	830 N. LATHROP	CITY-ST-ZIP	<b>700036516047</b> 05/17/04--01062--003 **385.00
STREET ADDRESS	RIVER FOREST, IL		
CITY-ST-ZIP			
DOCUMENT #	FERRARA, MARILYN D.	STREET ADDRESS	
NAME	830 N. LATHROP	CITY-ST-ZIP	<b>700036516047</b> 05/17/04--01062--004 **150.00
STREET ADDRESS	RIVER FOREST, IL		
CITY-ST-ZIP			
DOCUMENT #	FERRARA, SALVATORE	STREET ADDRESS	
NAME	2 S 744 BARBIZON AVE	CITY-ST-ZIP	
STREET ADDRESS	OAK BROOK, IL 60523		
CITY-ST-ZIP			
DOCUMENT #	ALIOTO, SERAJEAN F.	STREET ADDRESS	
NAME	1007 FRANKLIN	CITY-ST-ZIP	
STREET ADDRESS	RIVER FOREST, IL		
CITY-ST-ZIP			
DOCUMENT #	DAVY, NELLA F.	STREET ADDRESS	
NAME	1234 FRANKLIN	CITY-ST-ZIP	
STREET ADDRESS	RIVER FOREST, IL		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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

<b>SIGNATURE:</b> <u><i>Nello V. Ferrara</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	<b>NELLO V. FERRARA</b> Date	<b>4-05-04 708-366-0500</b> Daytime Phone #
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