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

DOCUMENT # A32224 1. Entity Name EMORY CARTER FARM LIMITED PARTNERSHIP					SECRETARY OF STATE OIVISION OF CORPORATIONS 04 APR -8 AM 8: 26	
				~	- 04 MI W -0 MM 8: 56	
Principal Place of Business Mailing Address .					}	
858 EVERGREEN AVENUE 858 EVERGREEN AVENU LAKE CITY FL 32025-6846 LAKE CITY FL 32025-68						
Principal Place of Business 3. Mailing Address						
2. Figiopal Flace of Edulides						
Suite, Apt. #, etc. Suite, Apt. #, etc.					MOORE CR2E003 (11/03)	
,		0: 10:				
City & State		City & State			4. FEI Number 59-3093879 Applied For Not Applicable	
Zip	Country Zip		Country		5. Certificate of Status Desired \$8.75 Additional	
					Fee Required	
	6. Name and Address of Current F	Registered Agent		Nome	7. Name and Address of New Registered Agent	
GREENE, MARY ANN						
858 EVERGREEN AVENUE				Street Address (P.O. Box Number is Not Acceptable)		
LAKE CITY FL 32055				5463E Evergreen Dr		
				Lake City F/ 32025-6875		
City				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 if applicable.						
9. Capital Contributions \$2,100,000.00 10. Amount of Capital Contributions 11 MAKE CHECK PAYABLE TO FLORED OF STATE						
as shown on record. In PLORIDA 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.						
12.	GENERAL PARTNER		13.	<u> </u>	ADDRESS CHANGES ONLY	
DOCUMENT #				ET ADORESS		
NAME	GREENE, MARY ANN 546 SE EVERGREEN BRIVE LAKE CITY FL 32025		31110	STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY	CITY-ST-ZIP	900032284199	
			╂		7/47/19/04 - 01061 - 029 **535.00	
DOCUMENT # NAME	HARRISON SUERRY BRYAN ROUTE 22, BOX 2393		STRE	STREET ADDRESS	Oli Contact Organia and	
_STREET ADDRESS			ł	}		
CITY-ST-ZIP	LAKE CITY FL 32024			-ST-21P		
DOCUMENT #				EET ADDRECS		
NAME	CARTER-MILLICAN, PAIGE			EET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	ROUTE 10, BOX 938			'-ST-ZIP		
	LAKE CITY FL 32025		-	- 		
DOCUMENT # NAME	JACKSONVILLE FL 32217			EET ADDRESS		
STREET ADDRESS				 		
CITY-ST-ZIP				'-ST-ZIP	0 000/	
DOCUMENT #	Carter Evergreen, Inc. 546 SE Evergreen Dr. Lake City, Fl. 32025-6875			EET ADDRESS C	vangel 1-26-200	
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CITY-ST-ZIP	Lake City, Fl.		CITY	·31-4/	a cond	
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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 eath; 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						