2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

FILED 04 HAY 24 PM 1: 36 **DOCUMENT # A32748** LAMBETH CITRUS, LTD. CE TO VITSTATE TALLAMASTLE FLORIDA MJH Principal Place of Business Mailing Address 505 - 66TH AVENUE P.O. BOX 2488 VERO BEACH, FL 32968 VERO BEACH, FL 32961-2488 2. Principal Place of Business 3. Mailing Address 7150 20th Street Suite, Apt. #, etc. 04272004 Chg-LP City & State City & State ____ 4.=FEI-Number-65-0317558 Not Applicable Country U. 3A. \$8.75 Additional 5.-Certificate of Status Desired ______ 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LAMBETH, GEORGE S. Street Address (P.O. Box Number is Not Acceptable) 505 66TH AVENUE SW VERO BEACH, FL 32968 7/50 20 TO STREET 32966 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 GEORGE S. LAMBETH JE 9. Capital Contributions 10. Amount of Capital Contributions \$4,359,074.67 in FLORIDA to date. as Shown on record. 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 ADDRESS CHANGES ONLY 378682 DOCUMENT # STREET ADDRESS LAMBETH CITRUS PRODUCTS, INC. NAME STREET ADDRESS 505 66TH AVENUE SW CITY-ST-ZIP CITY-ST-ZIP VERO BEACH, FL DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS <u>600037859716</u> 06/11/04--01031--014 ******52 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 NÀME ÉSTRÉET ADDRESS CITY-ST-ZIP 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 to execute this report as required by Chapter 620. Florida Statutes