

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A33032

1. Entity Name
FARMONT PROPERTIES PARTNERS, LTD.



FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

04 MAR 26 AM 8:34

Principal Place of Business
 1302 PENNSYLVANIA AVENUE
 PALM HARBOR, FL 34683

Mailing Address
 1302 PENNSYLVANIA AVENUE
 PALM HARBOR, FL 34683



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02122004 Chg-LP CR2E003 (10/03)

4. FEI Number

59-3161639

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

RYDBERG, THOMAS H
STE 2630, 400 N. TAMPA STREET
TAMPA, FL 33602

7. Name and Address of New Registered Agent

Name **Dale Belcher**

Street Address (P.O. Box Number is Not Acceptable)

1302 Pennsylvania Ave

City

Palm Harbor

FL

Zip Code

34683

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

Dale Belcher

DATE

3/22/04

9. Capital Contributions
 as Shown on record.

\$540,000.00

10. Amount of Capital Contributions
 in FLORIDA 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 INFORMATION

DOCUMENT # **A33032**
 NAME **P. B. ODESSA PROPERTIES, INC.**
 STREET ADDRESS **1302 PENNSYLVANIA AVENUE**
 CITY-ST-ZIP **PALM HARBOR, FL 34683**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

600032717016
04/14/04--01015--005 **526.25

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Dale Belcher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/22/04

Date

727-784-1980

Daytime Phone #