


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
May 04, 2004 08:00 AM
Secretary of State

DOCUMENT # A33125 1. Entity Name AMERICAN VENTURES PROPERTY FUND-I, LTD.					
Principal Place of Business 255 ALHAMBRA CIRCLE SUITE 1100 CORAL GABLES, FL 33134			Mailing Address 255 ALHAMBRA CIRCLE SUITE 1100 CORAL GABLES, FL 33134		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. # etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0348540	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent BLUMBERG, PHILIP F. 255 ALHAMBRA CIRCLE SUITE 1100 CORAL GABLES, FL 33134				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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 _____ DATE _____					
9. Capital Contributions as Shown on record. \$20,000,000.00			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				13. ADDRESS CHANGES ONLY	
DOCUMENT #	B03000000200			STREET ADDRESS	
NAME	AVP FUND-I GP LIMITED PARTNERSHIP			CITY-ST-ZIP	
STREET ADDRESS	255 ALHAMBRA CIRCLE, SUITE 1100				
CITY-ST-ZIP	CORAL GABLES, FL 331347400				
DOCUMENT #	D00000000015			STREET ADDRESS	U000000150267
NAME	AVRI TRUST			CITY-ST-ZIP	05/10/04-80022-007 526.25
STREET ADDRESS	255 ALHAMBRA CIRCLE, SUITE 1100				
CITY-ST-ZIP	CORAL GABLES, FL 331347400				
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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 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. AVRA-CPI, Inc. Admin. General Partner, AVRI Trust, Managing General Partner, SIGNATURE: Philip F. Blumberg, Authorized Agent April 27, 2004 305.569.9500 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #					

STAPLE CHECK HERE