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

## SECRETARY OF STATE ON MATIONS DOCUMENT # A33312 04 APR 19 PM 2: 12 TPG SANIBEL REALTY, LTD. Principal Place of Business Mailing Address 1630 PERIWINKLE WAY 1630 PERIWINKLE WAY SANIBEL ISLAND, FL 33957 SANIBEL ISLAND, FL 33957 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04142004 Chg-LP CR2E003 (10/03) City & State City & State 4. FEI Number Applied For 65-0351322 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PROVO, BRUCE A Street Address (P.O. Box Number is Not Acceptable) 1630 PERIWINKLE WAY SANIBEL ISLAND, FL 33957 City Zip Code FL 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 10. Amount of Capital Contributions \$25,252.50 as Shown on record. in FLORIDA to date. 25 25 2 50 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. GENERAL PARTNER INFORMATION 12. 13. P33404 OCCUMENT # STREET ADDRESS 1100 Main, SYITE 1830 TPG FINANCIAL, INC. STREET ADDRESS 101 W. 11TH ST., #1200 Kansas City MO 64105 CITY-ST-ZIP CITY-ST-ZIP KANSAS CITY, MO DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 300035<u>83</u><u>0</u>583 CITY-ST-ZIP <del>05/10/04--01107--007 \*\*28</del>5.52 DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP HERE CITY-ST-ZIP DOCUMENT # STAPLE CHECK STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-SI-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 frue 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 his report as required by Chapter 620, Florida Statutes BRUCE A. PRNO SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER