2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

Apr 01, 2004 08:00 AM Secretary of State **DOCUMENT # A33363** PEMBROKE BUILDING ASSOCIATES, LTD. Principal Place of Business Mailing Address 3740 BEACH BOULEVARD, SUITE 300 3740 BEACH BOULEVARD, SUITE 300 JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32207 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01082004 CR2E003 (10/03) Chg-LP City & State City & State 4. FEI Number Applied For 59-3139855 Not Applicable Zip Zıp Country 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 DEMETREE, J. C., JR. 3740 BEACH BOULEVARD, SUITE 300 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE, FL 32207 City 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 lamiliar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable 10. Amount of Capital Contributions 9. Capital Contributions \$1,000,000.00 as Shown on record. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. DOCUMENT # STREET ADDRESS NAME PEMBROKE BUILDING ASSOCIATES, INC. STREET ADDRESS 3740 BEACH BLVD., #300 CITY-ST-ZIP U00000194601 CITY-ST-ZIP JACKSONVILLE, FL 04/06/04-60018-009-535.00 DOCUMENT # P40240 STREET ADDRESS NAME OLNAP, INC. STREET ADDRESS 4425 CORPORATION LN,#400 CITY-ST-ZIP CITY-ST-ZIP VIRGINIA BEACH, VA DOCUMENT # STREET ADDRESS NAME STREET ADDRESS City-ST-ZP City-St-ZiP DOCUMENT # STREET ADDRESS STREET ADDRESS C87Y-ST-78P CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-78 DOCUMENT # STREET ADDRESS STREET 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)(1), 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

FILED

Day 384 731