


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

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

DOCUMENT # A92000000266 1. Entity Name 1320 ASSOCIATES, LTD.					
Principal Place of Business 250 PARK AVENUE SOUTH, SUITE 630 WINTER PARK, FL 32789			Mailing Address P.O. BOX 3010 WINTER PARK, FL 32790		
2. Principal Place of Business Suite Apt #, etc			3. Mailing Address Suite Apt #, etc		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-3157325	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent BATTAGLIA, W.P. 250 SOUTH PARK AVENUE, SUITE 630 WINTER PARK, FL 32789				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 _____ <small>Signature typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$1,053,000.00			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 #	336201			STREET ADDRESS	
NAME	BATTAGLIA FRUIT CO., INC.			CITY - ST - ZIP	
STREET ADDRESS	P.O. BOX 3010				
CITY - ST - ZIP	WINTER PARK, FL 327903010				
DOCUMENT #				STREET ADDRESS	
NAME				CITY - ST - ZIP	
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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: <u>W.P. Battaglia</u> President, General Partner				Date: <u>04/29/04</u> 404/622-1700	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					

STAPLE CHECK HERE



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