


**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2004**

**FILED**  
**Apr 14, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A93000000238</b>	
1. Entity Name <b>C &amp; E MANUFACTURING LIMITED PARTNERSHIP</b>	

Principal Place of Business <b>151 RIVIERA DRIVE RIVIERA BEACH FL 33404</b>	Mailing Address <b>151 RIVIERA DRIVE RIVIERA BEACH FL 33404</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E003 (11/03)

6. Name and Address of Current Registered Agent <b>DE MARCELLUS, ROLAND 151 RIVIERA DRIVE RIVIERA BEACH FL 33404</b>		7. Name and Address of New Registered Agent Name Street Address (P O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. <b>\$137,860.80</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>500.00</b>	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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 #	DE MARCELLUS, ROLAND	STREET ADDRESS	
NAME	151 RIVIERA DRIVE	CITY - ST - ZIP	
STREET ADDRESS	RIVIERA BEACH FL 33404		
CITY - ST - ZIP			
DOCUMENT #	DE MARCELLUS, JUNE C	STREET ADDRESS	
NAME	151 RIVIERA DRIVE	CITY - ST - ZIP	
STREET ADDRESS	RIVIERA BEACH FL 33404		
CITY - ST - ZIP			
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CITY - ST - ZIP			

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04/20/04-80029-023 141.25

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:**  **2/18/04** **561-842 5614**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE