2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)

STAPLE

SIGNATURE:

Mar 19, 2004 08:00 AM Secretary of State **DOCUMENT # A93000000599** 1. Entity Name VILLAGE CONSTRUCTION, LTD. Principal Place of Business Mailing Address 1311 SOUTH VINELAND ROAD WINTER GARDEN FL 34787 1311 SOUTH VINELAND ROAD WINTER GARDEN FL 34787 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E003 (11/03) Applied For City & State City & State 4. FEI Number 59-3184883 Not Applicat Country Ζıp Country Zip \$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 ROBB, PAMELA M Street Address (P.O. Box Number is Not Acceptable) C/O PAMELA MILTON ROBB, P.A. 1311 SOUTH VINELAND ROAD WINTER GARDEN FL 34787 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 access the obligations of registered agent. DATE 10. Amount of Capital Contributions 260 9. Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE \$480,000.00 ,000 as Shown on record. SEE REVERSE SIDE FOR FEE INFORMATION 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. 13. DOCUMENT # P93000030303 STREET ADDRESS NAME VILLAGE CONSTRUCTION COMPANY, INC. 1046 LAKE FRANCIS DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP APOPKA FL 32712 U00000097368 DOCUMENT # 03/26/04-80037-006 526.25 STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY+ST-ZIP CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP 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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

OF SIGNING GENERAD PARTNER

FILED

Daytime Phone #