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

FILED Apr 29, 2004 08:00 AM Secretary of State UMENT # A93000000707 SUTTE PARTNERSHIP, LTD. Principal Place of Business Mailing Address 2433 LEE ROAD WINTER PARK FL 32789 2433 LEE ROAD WINTER PARK FL 32789 3. Mailing Address 2. Principal Place of Business Suite Apt. #. etc. Suite. Apt. #, etc. CR2E003 (11/03) Applied For City & State City & State 4. FE! Number 59-3187824 Not Applicable Country Country \$8.75 Additional Zıp 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SUTTE, ROBERT S Street Address (P.O. Box Number is Not Acceptable) 2433 LEE ROAD WINTER PARK FL 32789 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 familiar with, and accept the obligations of registered agent. SIGNATURE Signature. Typed or printed name of registared agent and tille if applicable 9. Capital Contributions 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE Amount of Capital Contributions \$431,899.00 \$502,823.00 in FLORIDA to date. 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. DOCUMENT # STREET ADDRESS SUTTE, ROBERT S STREET ADDRESS 2433 LEE ROAD CITY-SE-ZIP U0000015745**S** WINTER PARK FL 32789 CITY ST- ZIP 05/06/04-80027-006 526.25 DOCUMENT # STREET ADDRESS NAME SULLIVAN, ROBERT W JR STREET ADDRESS **484 PLEASANT STREET** CITY-ST-ZIP CJTY - ST - ZIE **BROCKTON MA 02403** DOCUMENT A STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY -ST - ZIP CITY-ST-ZIP 14. Thereby 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

Robert S. Sutte, President

SIGNATURE:

4/15/04 407-628-0505