2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

FILED Apr 20, 2004 08:00 AM Secretary of State

Daytime Phone #

DOCUMENT # A9300000784 1. Entity Name PELICAN ISLE YACHT CLUB PARTNERS, LTD.					Se	cretary of State	
Principal Place of Business Mailing Address 601 BAYSHORE BOULEVARD, SUITE 960 TAMPA, FL 33606 Mailing Address 601 BAYSHORE BOULEVARD, SUITE 960 TAMPA, FL 33606			ulevard, :	SUITE 960			
Principal Place of Business 3. Mailing Address							
Suite, Apt, #, etc.		Suite, Apt, #, etc.	Suite, Apt. #, etc.		03092004 Chg-LP	CR2E003 (10/03)	
City & State		City & State	City & State		4. FEI Number 59-3193580	Applied For Not Applicable	
Zip	Country	Z _f p	Cour	ntry	5. Certificate of Status Desired	S8.75 Additional Fee Required	
	Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name		
WOLFE, RANDOLPH J 100 N. TAMPA ST. STE. 2700 TAMPA, FL 33602				Street Address (P.O. Box Number is Not Acceptable)			
,							
				City		FL Zip Code	
	named entity submits this statement tions of registered agent	tor the purpose of changing) its register	ed office or register	ed agent, or both, in the State of Flo	orida. I am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and the if applicable DATE							
9. Capital Contributions as Shown on record \$3,576,896.00 10. Amount of Capital Contributions in FLORIDA to date							
	A GENERAL PARTNER NOTE: General Partners N	THAT IS A BUSINESS IAY NOT be changed or	ENTITY Non the form	UST BE REGIST n; an amendmen	ERED AND ACTIVE WITH TH	IIS OFFICE. eneral partner.	
12. GENERAL PARTNER INFORMATION 13. DOCUMENT # A93000000776					ADDRESS CH.	ANGES ONLY	
NAME	PELICAN ISLE YACHT CLUB ASSOCIATES, LTD.		STRI	EET ADDRESS			
STREET ADDRESS CITY-ST-ZIP	601 BAYSHORE BOULEVARD TAMPA, FL 33606	, SUITE 960	CITY	'-\$1-ZIP			
DOCUMENT # NAME			STR	EET ADDRESS	U0000	0135825	
STREET ADDRESS CITY-ST-ZIP			СПУ	'-ST-7IP	04/23/04	0135825 -80003-009-526.25	
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CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY ST-ZIP			STR	EET ADDRESS			
STREET ADDRESS CITY ST-ZIP			CITY	'-ST-ZIP			
DOCUMENT #			STR	EET ADDRESS	2014	array and the state of the stat	
STREET ADDRESS GITY-ST-ZIP		D 41 2 44		r-ST- ZIP			
14. I hereby indicated the recei	cerlify that the information supplied w I on this report is true and accurate ar ver or trustee empowered to execute	ith this filing does not qualify no that my signature shall ha fais report as required by Cr	y for the exe ave the sam hapter 620,	Florida Statutes		I further certify that the information at Partner of the limited partnership or	
SIGNATURE: Edward R. Oelschlaeger SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Cate Dayline Phone II							