

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

FILED

2004 APR 22 PM 3:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # A93000001179**

1. Entity Name  
**PARKER-RALEIGH DEVELOPMENT XXI, LIMITED PARTNERSHIP**



Principal Place of Business  
**201 NORTH FRANKLIN STREET, SUITE 2100  
TAMPA, FL 33602**

Mailing Address  
**201 NORTH FRANKLIN STREET, SUITE 2100  
TAMPA, FL 33602**

2. Principal Place of Business  
**5500 Atlantic Springs Road**  
Suite, Apt. #, etc.

3. Mailing Address  
**5500 Atlantic Springs Road**  
Suite, Apt. #, etc.

**Suite 103**

**Suite 103**

City & State  
**Raleigh, NC**

City & State  
**Raleigh, NC**

Zip Country  
**27616 USA**

Zip Country  
**27616 USA**

03192004 Chg-LP CR2E003 (10/03)

4. FEI Number  
**56-1852937**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**EDWARDS, JOSEPH D  
201 NORTH FRANKLIN STREET, SUITE 2100  
TAMPA, FL 33602**

**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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
as Shown on record. **\$0.00**

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**

DOCUMENT # **P93000078687**  
NAME **PARKER-RALEIGH DEVELOPMENT XXI, INC.**  
STREET ADDRESS **201 NORTH FRANKLIN STREET, SUITE 2100**  
CITY-ST-ZIP **TAMPA, FL 33602**

DOCUMENT #  
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CITY-ST-ZIP

**13. ADDRESS CHANGES ONLY**

STREET ADDRESS **5500-103 Atlantic Springs Road**  
CITY-ST-ZIP **Raleigh, NC 27616**

STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS **400035801454**  
CITY-ST-ZIP **05/10/04--01039--015 \*\*141.25**

STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

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: *Nancy C. O'P.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*4/7/04*  
Date

919-872-9000  
Daytime Phone #

*Nancy C. O'Parnic*

STAPLE CHECK HERE