2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

CHECK

SIGNATURE AND TYPED OR PR

DOCUMENT # A94000000213 EMERALD PLACE APARTMENTS OF BREVARD, LTD. 04 APR 30 AM 8: 09 SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 1002 WEST 23RD STREET, SUITE 400 1002 WEST 23RD STREET, SUITE 400 PANAMA CITY, FL 32405 PANAMA CITY, FL 32405 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E003 (10/03) 01072004 Chg-LP City & State City & State 4. FEI Number Applied For 59-3225733 Not Applicable Zip Country Country \$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 Lauretta J. Pippin HENRY, ROBERT F III Street Address (P.O. Box Number is Not Acceptable) 1002 WEST 23RD STREET, SUITE 400 PANAMA CITY, FL 32405 1002 W. 23rd St., Ste. 400 Zip Code 32405 Panama City purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this state the obligations SIGNATURE <u>Lauretta J. Pippin</u> 9. Capital Contributions 10. Amount of Capital Contributions \$490,820.00 as Shown on record. 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 filled to change a general partner. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. G76732 DOCUMENT # STREET ADDRESS FIRST SPECTRUM, INC. NAME 1002 WEST 23RD STREET, SUITE 400 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY, FL 32405 DOCUMENT # STREET ADDRESS 600036062296 STREET ADDRESS CiTY-ST-7IP 05/11/04--01066--014 **535.00 CITY-ST-7IP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME 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 cath; that I am a General Partner of the limited partnership or the receiver or present as required to execute this report as required by Chapter 620, Florida Statutes Lauretta J. Pippin, Secretary 4/22/04 (850) 769-8981 SIGNATURE:

Daytime Phone #