2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

FILED Mar 10, 2004 08:00 AM Secretary of State

Due by may 1, 2004					Secretary of State			
DOCUMENT # A9400000449 1. Entity Name HARDIN HAMMOCK ESTATES ASSOCIATES, LTD.								y or source
Principal Place	of Rusiness	Mailing Address		ļ	1	-		
5505 N. ATLANTIC AVENUE, SUITE 115 5505 N. ATLANTIC AVENUE COCOA BEACH, FL 32931 COCOA BEACH, FL 329					,			
Principal Place of Business 3. Mailing Address								
						IIII WINS WRST WEIT WEIT	S MAIST BEAUTE BEAUTE	PIRIL RIBIR SAGRII NG 1861
Suite, Apt. #, etc		Suite, Apt. #, etc		02122004	Chg-LP	CR2E00	3 (10/03)	
City & State		City & State		4. FEI Number 59-3232	164		Applied For Not Applicable	
Zip	Country	Zip	Coun	ntry	5. Certificate of	f Status Desired		8.75 Additional ee Required
	6. Name and Address of Current I	Registered Agent			7. Name and A	ddress of New R	egistered Ag	ent
MCPHILLIPS, JACQUELINE 5505 N. ATLANTIC AVENUE, SUITE 115 COCOA BEACH, FL 32931				Name				
				Street Address	(P.O. Box Number	is Not Acceptable	e)	
				City			FL	Zip Code
			1	<u> </u>				
	named entity submits this statement for ions of registered agent.	the purpose of changing its	register	ed office or registe	red agent, or both,	, in the State of Flo	xida. 1 am fa	niliar with, and accept
SIGNATURE -	Signature, typed or printed name of registered agent a	nd little if applicable.			<u>.</u>		DATE	
9. Capital Co as Shown		10. Amount of Capit in FLORIDA to c		butions				
	A GENERAL PARTNER T NOTE: General Partners MA							
12.	GENERAL PARTNER		13.			ADDRESS CHA		
DOCUMENT #	P94000025058		CTD	EET ADDRESS				
NAME	TADDRESS 757 ARTHUR GODFREY ROAD			EET ADDRESS				
STREET ADDRESS CITY - ST - ZIP				r-ST-ZIP	V00000082683			
DOCUMENT # P94000025055 NAME ADVANCED CAPITAL DEV. CORP, - HAMMOCK, INC			STR	EET ADDRESS	03/10/04-80006-003 535.00			
STREET ADDRESS CITY+ST-ZIP	1000 111 11 111 111 111 111 111 111 111			r-ST-ZIP				
DOCUMENT # NAME	P94000024756 HERITAGE PARTNERS GROUP IX, INC.			EET ADDRESS				
STREET ADORESS CITY-ST-ZIP	5505 N. ATLANTIC AVENUE, SU COCOA BEACH, FL 32931	J	cm	r-ST-ZIP				
DOCUMENT # NAME			STR	EET ADDRESS				
STREET ADDRESS CITY-ST-ZIP			cm	r-SI-ZIP				
DOCUMENT # NAME			STR	EET AODRESS				
STREET ADDRESS CITY-ST-ZIP			CITY	r-ST-ZIP				
DOCUMENT # NAME			STR	EET ADDRESS				
STREET ADDRESS CITY+ST-ZIP			CITY	/-ST-ZIP				-
14. I hereby of indicated the received	ertify that the information supplied with on this report is true and accurate and er or trustee empowered to execute this	this filing does not qualify for that my signature shall have s report as required by Char	the exe the sam ter 620,	emption stated in Se e legal effect as if r Florida Statutes	ection 119.07(3)(i), made under oath; t	, Florida Statutes, that I am a Genera	I further certiful Partner of the	y that the information ne limited partnership or