

2004 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2004

DOCUMENT # A94000001441

1. Entity Name  
HAMILTON FAMILY HOLDINGS, LTD.



Principal Place of Business  
5070 N. OCEAN BLVD., #17A SOUTH  
RIVIERA BEACH, FL 33404

Mailing Address  
5070 N. OCEAN BLVD., #17A SOUTH  
RIVIERA BEACH, FL 33404

FILED

2004 APR 23 PM 3: 54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



04192004 Chg-LP CR2E003 (10/03)

4. FEI Number  
65-0530599

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

HAMILTON, HARRY S  
~~5070 N. OCEAN BLVD., #17A SOUTH~~  
RIVIERA BEACH, FL 33404

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

800 NORTH FLAGLER DRIVE

City

WEST PALM BEACH

FL

Zip Code

33401

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. \$100.00

10. Amount of Capital Contributions  
in FLORIDA to date. 100

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 # P94000065095  
NAME HAMILTON FAMILY HOLDINGS, INC.  
STREET ADDRESS 5070 N. OCEAN BLVD., #17A SOUTH  
CITY-ST-ZIP RIVIERA BEACH, FL 33404

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CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

800 N. FLAGLER DRIVE

CITY-ST-ZIP

WEST PALM BEACH, FL 33401

STREET ADDRESS

CITY-ST-ZIP

200035797762

05/10/04--01034--008 \*\*141.25

STREET ADDRESS

CITY-ST-ZIP

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:

*[Signature]*

HARRY HAMILTON

4/19/04

561-655-3113

Signature and Title or Printed Name of Signing General Partner

Date

Daytime Phone #