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

STAPLE CHECK HERE

SIGNATURE:

DOCUMENT # A9400001799								<b>/</b> /	SECRETAR IVISION OF C	LED Y OF STA	NTF
1. Entity Name SUMMERSPORT ENTERPRISES, LLLP									i i i siniti NE C	ORPORA	TIÕNS
,				#***		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		04 APR -7 PM 1: 23			
Principal Place of Business Mailing Address								•			*
					11 EAST DANIA BEACH BLVD. NIA, FL 33004						
2. Principal Place of Business 3. Mailin				3. Mailing Add							
Suite, Apt. #, etc.				Suite, Apt. #, etc.			04022004	Chg-LP	CR2E0	03 (10/03)	
City & State				City & State				4. FEI Number 65-0546			Applied For Not Applicable
Zip	Country			Zip		Country	,	5. Certificate o	of Status Desired		88.75 Additional ee Required
6. Name and Address of Current Registered Agent							7. Name and Address of New Registered Agent				
MORRIS, CLINTON E						L	Name				
301 E. DANIA BEACH BLVD. DANIA, FL 33004							Street Address (f	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.											
9. Capital Contributions as Shown on record. \$84,000.00							ions ·				
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 amendme  12. GENERAL PARTNER INFORMATION 13.								t must be filed	ADDRESS CHA		
DOCUMENT #	162074					STREET /	ADDRESS				
NAME STREET ADDRESS	THE ARAGON GROUP, INC. SS 301 EAST DANIA BEACH BLVD.							· ··	<del></del>		
CITY-ST-ZIP	DANIA, FL 33004				CITY-ST	- ZIP	UUUU32263096 <del>- 04/03/0401014023 **535.00</del>				
DOCUMENT # NAME						STREET A	ADDRESS	04/03/04~701014~7023 **533.00			
STREET ADDRESS CITY-ST-ZIP					~ }	CITY-ST-ZIP					
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DOCUMENT #				ĺ	STREET A	ODAESS					
STREET ADDRESS CITY-ST-ZIP	***					CITY-ST-	-ZIP				
14. I hereby certify that the information supplied with this filling 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.											

Stephen F Snyder 4/4/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date