2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

the receiver or truster

SIGNATURE:

Apr 14, 2004 08:00 AM Secretary of State DOCUMENT # A95000000030 1. Entity Name EXCEL BUILDING, LTD. Mailing Address Principal Place of Business 4745 SUTTON PARK C.T, BLDG 500, STE 501 4745 SUTTON PARK C.T, BLDG 500, STE 501 JACKSONVILLE, FL 32224 IACKSONVILLE, FL 32224 3. Mailing Address 2, Principal Place of Business Suite, Apt. #. etc. Suite, Apt. #. etc. 03242004 CR2E003 (10/03) Chg-LP 4. FEI Number Applied For City & State City & State 59-3285690 Not Applicable Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 5. Name and Address of Current Registered Agent Name BARTLETT, BARON Street Address (P.O. Box Number is Not Acceptable) 50 HIGHWAY A1A #103 PONTE VEDRA BEACH, FL 32082 City Zip Code FI 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 Sgrature, typed or printed name of registored agent and little 8 applicable 9. Capital Contributions 10. Amount of Capital Contributions \$300,228.00 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. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY 12. DOCUMENT # P94000080516 STREET ADDRESS FIRST COAST DEVELOPMENT GROUP, INC. MAME STREET ADDRESS 4745 SUTTON PARK C.T, BLDG 500, STE 501 U00000120643 CITY ST-789 CITY-ST-7/P JACKSONVILLE, FL 32224 04/20/04 00015 DOCUMENT # SURFET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CATY-ST-ZAP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-2IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS. CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CATY+SI-Z8P CITY-53-23P formation supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes, I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under eath, that I am a General Partner of the limited partnership or spourced to execute this report as required by Chapter 620, Florida Statutes 14. I hereby certify that the in indicated on this report is

NATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

FILED