

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

APPROVED  
AND  
FILED

04 APR -9 PM 4:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # A95000000563**

1. Entity Name  
PINEAPPLE AVENUE ASSOCIATES, LTD.



Principal Place of Business  
240 S. PINEAPPLE AVENUE  
10TH FL  
SARASOTA, FL 34236

Mailing Address  
P.O. BOX 49948  
SARASOTA, FL 34230-6948



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01222004 Chg-LP CR2E003 (10/03)

City & State

City & State

4. FEI Number  
65-0580465

Applied For  
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BAND, DAVID S  
240 S. PINEAPPLE AVENUE 10TH FL  
SARASOTA, FL 34236

Name

Street 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.

DATE

9. Capital Contributions as Shown on record. \$19,600.00

10. Amount of Capital Contributions 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.**

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # P95000027816  
NAME PINEAPPLE AVENUE ASSOCIATES, INC.  
STREET ADDRESS 240 S PINEAPPLE AVENUE, 10TH FL  
CITY-ST-ZIP SARASOTA, FL 34236

STREET ADDRESS

CITY-ST-ZIP

300033172183

04/20/04--01053--011 \*\*225.95

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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: David S. Band David S. Band, President of Pineapple Avenue Ass., Inc., Gen Part

3/11/04

941-366-6660

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE