


2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY SEPTEMBER 8, 2004

DOCUMENT # A95000000871			
1. Entity Name RONALD J. NEMEYER LIMITED PARTNERSHIP			
Principal Place of Business 2234 RIVER ROAD JACKSONVILLE FL 32207		Mailing Address 2234 RIVER ROAD JACKSONVILLE FL 32207	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

FILED
04 AUG 12 PM 2: 07
SECRETARY OF STATE
TALLAHASSEE FLORIDA



MOORE CR2E003 (4/04) *412*

6. Name and Address of Current Registered Agent BOYER, LORI N 2234 RIVER ROAD JACKSONVILLE FL 32207		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 300040144833 08/12/04--01077--003 **526.25 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE _____	
9. Capital Contributions as Shown on record. \$460,662.95	10. Amount of Capital Contributions in FLORIDA to date.		
11. FILE NOW!!! Due by September 8, 2004! See Block 11 instructions for fee info. If first notice was not received, check box and do not include \$400 late fee. <input checked="" type="checkbox"/>			

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 #	NAME	STREET ADDRESS	
NAME	BOYER, LORI T	CITY-ST-ZIP	
STREET ADDRESS	2234 RIVER ROAD		
CITY-ST-ZIP	JACKSONVILLE FL 32207		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	NAUMANN, TERRELL A	CITY-ST-ZIP	
STREET ADDRESS	2234 RIVER ROAD		
CITY-ST-ZIP	JACKSONVILLE FL 32207		
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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: *Lori Boyer* August 11, 2004 904-398-0112
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #