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

SIGNATURE:

## Mar 25, 2004 08:00 AM Secretary of State **DOCUMENT # A95000001240** t. Entity Name WESTGATE PALATKA INVESTORS, LTD. Principal Place of Business Mailing Address 24401 HARBOUR VIEW DRIVE 24401 HARBOUR VIEW DRIVE PONTE VEDRA BEACH, FL 32082 PONTE VEDRA BEACH, FL 32082 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt #, etc. 03222004 Chg-LP CR2E003 (10/03) City & State City & State 4. FEI Number Applied For NOT APPLICABLE Not Applicable Ζip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HOOD, CHARLES L Street Address (P.O. Box Number is Not Acceptable) 24401 HARBOUR VIEW DRIVE PONTE VEDRA BEACH, FL 32082 City Zip Code 3. 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 Sgrauze, typed or printed name of registered agent and title if applicable. CATE 9. Capital Contributions 10. Amount of Capital Contributions \$750,000.00 in FLORIDA to date. as Shown on record. 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 ADDRESS CHANGES ONLY 12 13. DOCUMENT A STREET ADDRESS NAME HOOD, CHARLES L STREET ADDRESS 24401 HARBOUR VIEW DRIVE CITY-ST-ZIP CTY-ST-219 PONTE VEDRA BEACH, FL 32082 DECLIMENT # STREET ADDRESS U00000103625 NAME 54/05/04-80062-017 141.25 STREET ADDRESS CRY-ST-ZP CITY-ST-ZP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS DTY-57-289 CTY-ST-ZP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CCY-SI-ZP CITY-ST-DP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CRY-ST-ZP STAPLE DOCUMENT # STREET ADDRESS SAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP 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 employeed to execute this report as required by Chapter 620, Florida Statutes

FILED

<u>March 22, 2004 (904) 280.26</u>21