2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

STAPLE CHECK

SIGNATURE:

Apr 26, 2004 08:00 AM Secretary of State **DOCUMENT # A95000001277** BELLEAIR PINES LIMITED PARTNERSHIP Principal Place of Business Mailing Address 2554 OAK TRAIL SOUTH 2554 OAK TRAIL SOUTH CLEARWATER, FL 33764 CLEARWATER, FL 33764 2. Principal Place of Business 3. Mailing Address Suite Apt. #, etc. Suite, Apt. #, etc. 04072804 CR2E003 (10/03) Cha-LP 4. FEt Number Applied For City & State City & State 59-3335737 Not Applicable \$8.75 Additional Zο Country Zio Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ASTUTO, ANGELO Street Address (P.O. Box Number is Not Acceptable) 2554 OAK TRAIL SOUTH **CLEARWATER, FL 34624-6895** City 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 Storida. I am tamitiar with, and accept the obligations of registered agent. SIGNATURE -£#XE Signature, typed or presed name of registered agent and trite it applicable 18. Amount of Capital Contributions 9. Capital Contributions \$1,370,000.00 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. 563240 BOCHMENT # STREET ADDRESS CONVENIENT OAKS, INC. STREET AUDRESS 2554 OAK TRAIL SOUTH CITY-ST-78P CITY - ST - ZIP CLEARWATER, FL 346246895 U00000145803 05/03/04-80039-015-526,25 DOCUMENT # STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP DOCUMENT & STREET ADDRESS SAME STREET ADDRESS CARY-ST-ZIP CITY-ST-JP DOCUMENT 4 STREET ADDRESS NAME STREET ADLINESS SITY-SI-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS MARAE STREET ADDRESS CRY-ST-ZIP CSTY - ST - ZsP DOCUMENT # STREET ADDRESS 1127.AF STREET ADDRESS City-SI-ZIP OTY-SE-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 Statisties, 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 Statisties.

ANGELO

FILED