

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

04 APR 15 PM 3:48

DOCUMENT # A95000001331

1. Entity Name
 O'DONNELL & REIN, LLLP



Principal Place of Business
 4495 HIGHWAY 17
 ORANGE PARK, FL 32003

Mailing Address
 4495 HIGHWAY 17
 ORANGE PARK, FL 32003



2. Principal Place of Business

1441 WILKIES POINT RD
 Suite, Apt. #, etc.

3. Mailing Address

1441 WILKIES POINT RD
 Suite, Apt. #, etc.

04132004 Chg-LP CR2E003 (10/03)

City & State

GREEN CAVE SPRINGS FL

Zip
 32043

Country
 USA

City & State

GREEN CAVE SPRINGS, FL

Zip
 32043

Country
 USA

4. FEI Number

59-3339879

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

O'DONNELL REIN, LINDA
 4495 HIGHWAY 17
 ORANGE PARK, FL 32003

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1441 WILKIES POINT RD

City

GREEN CAVE SPRINGS

FL

Zip Code

32043

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 Linda O'Donnell Rein LINDA O'DONNELL-REIN GEN PARTNER 4/14/04
 Signature, typed or printed name of registered agent and title if applicable. DATE

9. Capital Contributions
 as Shown on record.

\$1,000,000.00

10. Amount of Capital Contributions
 in FLORIDA to date.

20,000

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

DOCUMENT #

NAME REIN, LINDA O
 STREET ADDRESS 4495 HIGHWAY 17
 CITY-ST-ZIP ORANGE PARK, FL 32003

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

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DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

1441 WILKIES POINT RD
 CITY-ST-ZIP GREEN CAVE SPRINGS FL 32043

STREET ADDRESS

CITY-ST-ZIP

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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: Linda O'Donnell Rein LINDA O'DONNELL-REIN 4/14/04 904 476-6724
 Signature and typed or printed name of signing general partner Date Daytime Phone #

STAPLE CHECK HERE