


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

FILED

2004 APR 21 PM 3:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # A95000001397		
1. Entity Name BOCA MARINA, LTD.		

Principal Place of Business 321 E. HILLSBORO BLVD. DEERFIELD BEACH, FL 33441	Mailing Address 321 E. HILLSBORO BLVD. DEERFIELD BEACH, FL 33441
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

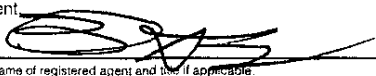


03082004 Chg-LP CR2E003 (10/03)

4. FEI Number 65-0669568	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  BOCA DEVELOPERS, INC. 321 E. HILLSBORO BLVD. DEERFIELD BEACH, FL 33441		7. Name and Address of New Registered Agent Name TED STOTZER Street Address (P.O. Box Number is Not Acceptable) 321 E HILLSBORO BLVD City DEERFIELD BEACH FL Zip Code 33441	
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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 	DATE 3/30/04

9. Capital Contributions as Shown on record. \$16,000,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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**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 #	P95000068742	STREET ADDRESS	
NAME	BOCA DEVELOPERS, INC.	CITY-ST-ZIP	
STREET ADDRESS	321 E. HILLSBORO BLVD.		
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441		
DOCUMENT #		STREET ADDRESS	600036066096
NAME		CITY-ST-ZIP	05/11/04--01071--022 **526.25
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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	
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-8-04 954-418-0208

Date

Daytime Phone #