

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


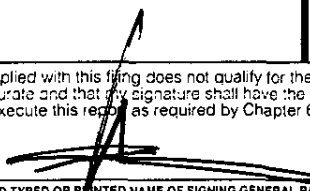
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



03162004 Chg-LP CR2E003 (10/03)

<b>DOCUMENT # A95000001480</b> 1. Entity Name <b>DOGFISH ENTERTAINMENT, LTD.</b>			
Principal Place of Business <b>1551 SANDSPUR ROAD          MAITLAND, FL 32751</b>		Mailing Address <b>1551 SANDSPUR ROAD          MAITLAND, FL 32751</b>	
2. Principal Place of Business <b>875 Concourse Pkwy S          Ste. 150          Maitland, FL          32751</b>		3. Mailing Address <b>875 Concourse Pkwy S          Suite 150          Maitland, FL          32751</b>	
4. FEI Number <b>59-3340372</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent <b>MCLEOD, W. EDWARD          284 PARK AVE., NORTH          WINTER PARK, FL 32789</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
9. Capital Contributions as Shown on record. <b>\$200,000.00</b>		10. Amount of Capital Contributions in FLORIDA to date.	
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>			
<b>12. GENERAL PARTNER INFORMATION</b>		<b>13. ADDRESS CHANGES ONLY</b>	
DOCUMENT #	P95000070758	STREET ADDRESS	
NAME	SPRINGSHOT, INC.	CITY-ST-ZIP	
STREET ADDRESS	% 284 PARK AVE., N.		
CITY-ST-ZIP	WINTER PARK, FL 32789		
DOCUMENT #		STREET ADDRESS	<b>875 Concourse Pkwy S, #150</b>
NAME	GINSBURG, ALAN H	CITY-ST-ZIP	<b>MAITLAND, FL 32751</b>
STREET ADDRESS	1551 SANDSPUR ROAD		
CITY-ST-ZIP	MAITLAND, FL 32751		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	<b>400035844284</b>
NAME		CITY-ST-ZIP	<b>05/10/04--01127--025 **526.25</b>
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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 19.07(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.			
<b>SIGNATURE:</b> 		<b>4-7-04</b> Date	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER <b>Alan H. Ginsburg</b>		Officer's Name #	

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