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APPROVED
AND
FILED

04 MAY -4 PM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A95000001723			
1. Entity Name SMALL WAREHOUSES LIMITED PARTNERSHIP			
Principal Place of Business 2866 NE 30TH ST., #21 FT. LAUDERDALE, FL 33306		Mailing Address 2866 NE 30TH ST., #21 FT. LAUDERDALE, FL 33306	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FBT Number 65-0625437		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DOANE, JAMES F 2866 NE 30TH ST. FT. LAUDERDALE, FL 33306		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ Signature, initial or printed name of registered agent and date if applicable			
9. Capital Contributions as Shown on record. \$2,625,000.00		10. Amount of Capital Contributions in FLORIDA to date.	
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 #	NAME	STREET ADDRESS	
NAME	DOANE, JAMES F	CITY-ST-ZIP	
STREET ADDRESS	2866 NE 30TH ST. Apt. 21		
CITY-ST-ZIP	FT. LAUDERDALE, FL 33306		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	DOANE, NANCY L	CITY-ST-ZIP	
STREET ADDRESS	2866 NE 30TH ST. Apt. 21		
CITY-ST-ZIP	FT. LAUDERDALE, FL 33306		
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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 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: <i>James F. Doane</i>		Date: <i>Apr. 29, 2004</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date	

STAPLE CHECK HERE

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