


**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2004**

**FILED**  
**Feb 05, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A96000001800</b>					
<b>1. Entity Name</b> BIRD'S NEST INVESTMENTS, LTD.					
<b>Principal Place of Business</b> 2226 LAKE SHORE BLVD JACKSONVILLE FL 32210			<b>Mailing Address</b> 2226 LAKE SHORE BLVD JACKSONVILLE FL 32210		
<b>2. Principal Place of Business</b>			<b>3. Mailing Address</b>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	<b>4. FEI Number</b> 59-3410046	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>6. Name and Address of Current Registered Agent</b>  BIRD JR, C. ASHLEY 2226 LAKE SHORE BLVD JACKSONVILLE FL 32210				<b>7. Name and Address of New Registered Agent</b>  Name Street Address (P.O. Box Number is Not Acceptable)  City FL Zip Code	
<b>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.</b>					
<b>SIGNATURE</b> _____ <b>DATE</b> _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>9. Capital Contributions</b> as Shown on record.		<b>\$2,000,000.00</b>		<b>10. Amount of Capital Contributions</b> in FLORIDA to date.	
<b>11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION</b>					
<b>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.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS	BIRD, C. ASHLEY JR.		CITY - ST - ZIP		
CITY - ST - ZIP	JACKSONVILLE FL 32210				
DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS	BIRD, LOUISE		CITY - ST - ZIP		
CITY - ST - ZIP	SAN FRANCISCO CA 94107				
DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS			CITY - ST - ZIP		
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STREET ADDRESS			CITY - ST - ZIP		
CITY - ST - ZIP					
<b>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</b>					
<b>SIGNATURE:</b> <i>C. Ashley Bird Jr.</i>			<b>1-26-04 904-389-7371</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date Daytime Phone #</small>		



MOORE CR2E003 (11/03)

STAPLE CHECK HERE