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

STAPLE CHECK HERE

SIGNATURE:

May 06, 2004 08:00 AM Secretary of State DOCUMENT # A96000001994 1. Entity Name HUFFSTETLER FAMILY PARTNERSHIP, LLLP Principal Place of Business Mailing Address 429 EAST MAGNOLIA AVENUE EUSTIS FL 32726 429 EAST MAGNOLIA AVENUE EUSTIS FL 32726 3. Mailing Address 2. Principal Place of Business Suite, Apt #, etc. Suite, Apt #, etc. CR2E003 (11/03) MOORE Applied Far City & State 4. FEI Number City & State 59-3407488 Not Applicable Country Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent PAUL, RICHARD A Street Address (P.O. Box Number is Not Acceptable) 429 EAST MAGNOLIA AVENUE **EUSTIS FL 32726** City 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 Signature typed or printed name or registered agent and title if applicable 11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE 10. Amount of Capital Contributions 9. Capital Contributions \$6,300,000.00 SEE REVERSE SIDE FOR FEE INFORMATION as Shown on record. 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 13. 12. DOCUMENT A STREET ADDRESS HUFFSTETLER, LESLIE R., JR., TRUSTEE NAME 10555 RAIN FOREST ROAD STREET ADDRESS U00000160193 CITY-ST-ZIP BROOKSVILLE FL 34601 CITY-ST-ZIP <u>05/19/04-90011-010 526</u> DOCUMENT # STREET ADDRESS PAUL, RICHARD A TRUSTEE NAME STREET ADDRESS 429 EAST MAGNOLIA AVENUE CITY-ST-ZIP CITY-ST-ZIP EUSTIS FL 32726 DOCUMENT # STREET ADDRESS NAME ROU, ANN H TRUSTEE STREET ADDRESS 2000 COUNTRY CLUB DRIVE CITY-ST-ZIP CITY-ST-ZIP EUSTIS FL 32726 DOCUMENT# STREET ADDRESS HUFFSTETLER, MYRA TRUSTEE NAME 421 SOUTH CENTER STREET STREET ADDRESS CITY - ST - ZIP EUSTIS FL 32726 CITY-ST-ZIP DOCUMENT A STREET ADDRESS HUFFSTETLER, LESLIE R JR. NAME 10555 RAIN FOREST ROAD STREET ADDRESS CITY-ST-ZIP BROOKSVILLE FL 34601 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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.

Con Gulater 4/29/04 (352

FILED