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

		D	UE BY MAY	1, 2004						
- 1	OCUI Entity Nam		6000002192		·		- ਦਾ ਵਜ	re Fn		
5	SONOMA CONSTRUCTORS, LTD.						FILED			
-	Principal Place of Business Mailing Address					G WE TO	2004 FEB 20	PM 3: 3	39	
1	10400 COUNTY ROAD 48 10400 COUNTY ROAI HOWEY-IN-THE-HILLS FL 34737 HOWEY-IN-THE-HILLS					737	DIVISION OF GO TALLAHASSE	RPORAT E, FLOR	IONS IDA	
2.	2. Principal Place of Business :			3. Mailing Address						
	Suite, Apt. #, etc.			Suite, Apt. #. etc.		MOORE	CR2E00	03 (11/03)		
-	City & State			City & State		<del></del>	4. FEI Number 59-3437	1 40	Applied For	
-	Zip Country		iry 2	Zip Cour		itry	5. Certificate of Status Desir		Not Applicable  \$8.75 Additional	
-	6. Name and Address of Current			gistered Agent			7. Name and Address of Ne		Fee Required	
						Name				
	BEUCHER, ROBERT N 10400 COUNTY ROAD 48					Street Address (P.O. Box Number is Not Acceptable)				
	HOWEY-IN-THE-HILLS FL 34737									
						City		F	Zip Code	
8	<ol> <li>The above named entity submits this statement for the purpose of changing its registered of the obligations of registered agent.</li> </ol>					ed office or register	ed agent, or both, in the State of	of Florida. ⊹a	m familiar with, and accept	
s	IGNATURE									
$\vdash$	Signature, typed or printed name of registered agent and title if applicable.				tal Contri	butions	11. MAKE C	DATE HECK PAYAB	E LE TO FL. DEPT. OF STATE	
$\vdash$	as Shown on record.  \$1,000.00  IN. Altibulity of Capital in FLORIDA to dat  A GENERAL PARTNER THAT IS A BUSINESS ENT					HIST BE BEGIST	SEE RE	VERSE SIDE I	FOR FEE INFORMATION	
	NOTE: General Partners MAY NOT be changed on the form; an amendment						t must be filed to change	a general p	partner.	
-	12. GENERAL PARTNER INFORMATION DOCUMENT # P96000095590				13.	<u> </u>	ADDRESS	CHANGES C	ONLY	
	AME TREET ADDRESS	SONOMA HILLS, 1		STRE	EET ADDRESS	<del></del>				
1	TY-ST-ZIP HOWEY-IN-THE-HILLS FL 34737				CITY	-ST-ZIP				
1 -	OCUMENT # AME				STRE	EET ADDRESS			-	
- 1	TREET ADDRESS ITY-ST-ZIP	;			CITY	-ST-ZIP	800020061708		'08	
- 1	ocument # Ame				STRE	EET ADDRESS	03/09/0401020003 **158.15			
- 1	STREET ADDRESS CITY-ST-ZIP			СПҮ	'-ST-2IP			_		
- 1	OCUMENT# Ame			•	STRI	EET ADDRESS				
	TREET ADDRESS ITY-ST-ZIP				CITY	'-ST-ZIP				
~ I [	ocument # Ame				STRI	EET ADDRESS				
影이	TREET ADDRESS ITY-ST-ZPZ				CITY	'-ST-ZIP				
ΔI	OCUMENT (*** AME				STRI	EET ADDRESS	•			
C	TREET ADDRESS ITY-ST-ZIP					'-ST-ZIP				
1	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. If further certify that the information indicated on this report is true 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 the receiver or trustee empowered to execute this report as required by Chapter 630, Florida Statutes.								certify that the information r of the limited partnership or	
	SIGNAT		TURE AND TYPED OR PRINTE	D NAME OF SIGNING GENER	LIV.	<b>1</b> -	2-11-04P	<del></del> -	Daytime Phone #	