

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

**FILED**  
**Apr 28, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # A97000000254

1. Entity Name  
SUGAR HILL APARTMENTS, LTD.



Principal Place of Business  
8500 N.W. 25 AVENUE  
MIAMI, FL 33147

Mailing Address  
8500 N.W. 25 AVENUE  
MIAMI, FL 33147



2. Principal Place of Business

3. Mailing Address

Suite, Apt # etc

Suite, Apt # etc

City & State

City & State

Zip

Country

Zip

Country

04082004 Chg-LP CR2E003 (10/03)

4. FEI Number  
NOT APPLICABLE

Applied For  
Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WASHINGTON, LYNN C  
% HOLLAND & KNIGHT  
701 BRICKELL AVE., SUITE 3000  
MIAMI, FL 33147

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

Signature (typed or printed name of registered agent and title, if applicable)

DATE

9. Capital Contributions as Shown on record \$100.00

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 # 714512  
NAME THE URBAN LEAGUE OF GREATER MIAMI, INC  
STREET ADDRESS 8500 N.W. 25 AVENUE  
CITY - ST - ZIP MIAMI, FL 33147

STREET ADDRESS  
CITY - ST - ZIP

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00000156947  
05/06/04-80008-007 150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(b) 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:

*[Handwritten Signature]*

04/28/04 305/696-4450

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE