


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

**FILED  
Apr 13, 2004 08:00 AM  
Secretary of State**

**DOCUMENT # A97000000584**  
1. Entity Name  
**PATTON-PITOCHELLI FAMILY LIMITED PARTNERSHIP**



Principal Place of Business: **4224 MORENA LANE JACKSONVILLE FL 32207**  
Mailing Address: **C/O MARY M. PATTON 4224 MORENA LANE JACKSONVILLE FL 32207**

2. Principal Place of Business: Suite, Apt. #, etc.  
3. Mailing Address: Suite, Apt. #, etc.

City & State: \_\_\_\_\_  
City & State: \_\_\_\_\_

Zip: \_\_\_\_\_ Country: \_\_\_\_\_  
Zip: \_\_\_\_\_ Country: \_\_\_\_\_



MOORE CR2E003 (11/03)

4. FEI Number: **59-3436126**  
Applied For:  Not Applicable

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

6. Name and Address of Current Registered Agent:  
**PATTON, MARY C  
4224 MORENA LANE  
JACKSONVILLE FL 32207**

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

9. Capital Contributions as Shown on record: **\$2,050,944.00**  
10. Amount of Capital Contributions in FLORIDA to date: **1,839,479**  
11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

**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 #	PATTON, MARY M TRUSTEE	STREET ADDRESS	
NAME	4224 MORENA LANE	CITY - ST - ZIP	0000001 19997
STREET ADDRESS	JACKSONVILLE FL 32207		04/20/04-80006-008 526.25
CITY - ST - ZIP		STREET ADDRESS	
DOCUMENT #	PATTON, MARY C	CITY - ST - ZIP	
NAME	4224 MORENA LANE	STREET ADDRESS	
STREET ADDRESS	JACKSONVILLE FL 32207	CITY - ST - ZIP	
CITY - ST - ZIP		STREET ADDRESS	
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STREET ADDRESS		CITY - ST - ZIP	
CITY - ST - ZIP		STREET ADDRESS	

STAPLE CHECK HERE

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: Mary M. Patton Date: 4/8/04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER