

# 2004 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000000812

FILED  
Jan 21, 2004  
Secretary of State

**Entity Name:** HERON POINTE, LTD.

**Current Principal Place of Business:**

2121 PONCE DE LEON BLVD.,  
PH  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2121 PONCE DE LEON BLVD.,  
PH  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 65-0754876      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

REGISTERED AGENTS OF FLORIDA LLC  
100 S.E. SECOND STREET  
SUITE 2900  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Capital Contributions as Shown on record:** 4,249,570.00

**Amount of Capital Contributions in Florida to date:** 4,249,570.00

**GENERAL PARTNER INFORMATION:**

**ADDRESS CHANGES ONLY:**

Document #:

Name: CORNERSTONE HERON POINTE, INC.

Address: 2121 PONCE DE LEON BLVD., PH

City-St-Zip: CORAL GABLES, FL 33134

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: LEON J. WOLFE

PRES

01/21/2004

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date