


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Mar 04, 2004 08:00 AM
Secretary of State

DOCUMENT # A97000001142

1. Entity Name
2866 MARION HOLDINGS LTD.




Principal Place of Business Mailing Address
1773 WILTSHIRE VILLAGE DRIVE **1773 WILTSHIRE VILLAGE DRIVE**
WELLINGTON, FL 33414 **WELLINGTON, FL 33414**

2. Principal Place of Business 3. Mailing Address

Suite, Apt #, etc. Suite, Apt #, etc.

City & State City & State

Zip Country Zip Country

02192004 Chg-LP CR2E003 (10/03)

4. FEI Number Applied For
65-0763829 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	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		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 date if applicable.

9. Capital Contributions as Shown on record. \$420,000.00 10. Amount of Capital Contributions in FLORIDA to date. 420,000.00

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 #	M9700000288	STREET ADDRESS	
NAME	2866 MARION MORTGAGE LLC ✓	CITY-ST-ZIP	
STREET ADDRESS	1773 WILTSHIRE VILLAGE DRIVE		U00000087662
CITY-ST-ZIP	WELLINGTON, FL 33414		03/15/04-80019-015 535.00
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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: MICHAEL SHERRY 2/26/04 914 793-1793
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE