2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # A97000001234

1. Entity Name
PASCO PROJECT INVESTMENT PARTNERSHIP, LTD.

Principal Place of Business	Mailing Address
702 NORTH FRANKLIN STREET TAMPA, FL 33602	TECO PLAZA 8 P.O. BOX 111 TAMPA, FL 33601-0111

2. Principal Place of Business	3. Mailing Address
Suite, Apt # etc	Suite, Apt # etc
City & State	City & State
Zip / Country	Zip / Country

01132004 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3455087 ☐ 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
MCDEVITT, SHELIA M TECO PLAZA 7 - LEGAL DEPARTMENT 702 NORTH FRANKLIN STREET TAMPA, FL 33602	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	10. Amount of Capital Contributions in FLORIDA to date
$620,730.00	$620,730.00

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 #	P97000042325	STREET ADDRESS	
NAME	PASCO POWER GP, INC.	CITY ST ZIP	
STREET ADDRESS	TECO PLAZA 8, 702 N FRANKLIN STREET		
CITY ST ZIP	TAMPA, FL 33602		
DOCUMENT #		STREET ADDRESS	UD00000158310
NAME		CITY ST ZIP	05/07/04-80017-004 526.25
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CITY ST ZIP			

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.

S.Mark Rudolph, Assistant Controller
Pasco Power GP, Inc.
(813) 228-1330

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #