

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

DOCUMENT # A97000001259

1. Entity Name

ADR INVESTMENTS, LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 APR -7 AM 10:45

Principal Place of Business

10650 HAVERFORD ROAD, SUITE 4
JACKSONVILLE FL 32218

Mailing Address

10650 HAVERFORD ROAD, SUITE 4
JACKSONVILLE FL 32218

2. Principal Place of Business

11356 Harlan Drive

3. Mailing Address

11356 Harlan Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jax., FL

City & State

Jax., FL

Zip

32218

Country

Duval

Zip

32218

Country

Duval

MOORE

CR2E003 (11/03)

4. FEI Number

59-3472317

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DRURY, MARK A
10650 HAVERFORD ROAD, SUITE 4
JACKSONVILLE FL 32218

New Address →

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

11356 Harlan Dr

City

Jax

FL

Zip Code

32218

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.

Mark A. Drury

4/4/04

DATE

9. Capital Contributions as Shown on record.

\$49,500.00

10. Amount of Capital Contributions in FLORIDA to date.

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

DOCUMENT # J44635
NAME AMERICAN DREAM REALTY OF JAX, INC.
STREET ADDRESS 10650 HAVERFORD ROAD, SUITE 4
CITY-ST-ZIP JACKSONVILLE FL 32218

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

11356 Harlan Drive

CITY-ST-ZIP

Jax., FL 32218

STREET ADDRESS

CITY-ST-ZIP

900033106219

04/20/04--01007--004 **444.00

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Mark A. Drury

Date

4/4/04

Daytime Phone #

904-752-4700

STAPLE CHECK HERE