

**2004 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2004**

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # A97000001343

1. Entity Name  
ETHEL H. LEVY FAMILY PARTNERSHIP, LTD.



Principal Place of Business  
401 S.W. 88TH TERRACE  
GAINESVILLE, FL 32607

Mailing Address  
401 S.W. 88TH TERRACE  
GAINESVILLE, FL 32607

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052004

Chg-LP

CR2E003 (10/03)

4. FEI Number  
59-3463512

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

LEVY, NORMAN S  
401 S.W. 88TH TERRACE  
GAINESVILLE, FL 32607

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

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

DATE

9. Capital Contributions  
as Shown on record. \$2,500,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

526.25

**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 #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
LEVY, NORMAN S  
401 S.W. 88TH TERRACE  
GAINESVILLE, FL 32607

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
LEVY, RHODA S  
15311 N.E. 173RD STREET  
WOODINVILLE, WA 98072

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

000026348060  
01/07/04--01035--002 \*\*526.25

Handwritten signature

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

NORMAN S. LEVY

1/6/2004 352-331-2020

STAPLE CHECK HERE