


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

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

<b>DOCUMENT # A97000001651</b>	
1. Entity Name <b>IAMONIA INVESTMENTS, LTD.</b>	

Principal Place of Business <b>1320 PIEDMONT DRIVE TALLAHASSEE FL 32312</b>	Mailing Address <b>1320 PIEDMONT DRIVE TALLAHASSEE FL 32312</b>
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2. Principal Place of Business Suite, Apt. #, etc	3. Mailing Address Suite, Apt. #, etc
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City & State	City & State	4. FEI Number <b>59-3488069</b>	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
Zip	Country	Zip	Country



MOORE CR2E003 (11/03)

6. Name and Address of Current Registered Agent <b>PROCTOR, W. THEO JR. 1320 PIEDMONT DRIVE TALLAHASSEE FL 32312</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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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. <b>\$7,501,000.00</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>7,501,000.00</b>	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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**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	
NAME	PROCTOR, W. THEO JR.	CITY - ST - ZIP	
STREET ADDRESS	1320 PIEDMONT DRIVE		
CITY - ST - ZIP	TALLAHASSEE FL 32312		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	PROCTOR, W. THEO III	CITY - ST - ZIP	
STREET ADDRESS	579 IAMONIA FARMS ROAD		
CITY - ST - ZIP	TALLAHASSEE FL 32312		
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05/05/04-80034-004 535.00

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:**  **W. THEO PROCTOR # 4/28/04 850 576-5165**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE