FILED
Mar 22, 2004 08:00 AM
Secretary of State

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # A97000001653

1. Entity Name
VENICE GATEWAY PROPERTIES, LTD.

01302004 Chg-LP CR2E003 (10/03)

Principal Place of Business	Mailing Address
% JAMES L. TURNER 200 S. ORANGE AVE. SARASOTA, FL 34236	% JAMES L. TURNER 200 S. ORANGE AVE. SARASOTA, FL 34236

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

4. FEI Number 59-3465060 — 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
TURNER, JAMES L 200 S. ORANGE AVENUE SARASOTA, FL 34236	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	$1,500,000.00	10. Amount of Capital Contributions in FLORIDA to date.	

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 #	P97000065020	STREET ADDRESS	U00000102203
NAME	VENICE NORTHGATE, INC.		
STREET ADDRESS	% 200 S. ORANGE AVENUE		
CITY-ST-ZIP	SARASOTA, FL 34236	CITY-ST-ZIP	04/05/04-80005-014 526.25
DOCUMENT #	H80044	STREET ADDRESS	
NAME	GULF COAST PROPERTY SERVICES, INC.		
STREET ADDRESS	4600 CAMINO REAL		
CITY-ST-ZIP	SARASOTA, FL 34231	CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #		STREET ADDRESS	
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NAME			
STREET ADDRESS			
CITY-ST-ZIP		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

SIGNATURE: [signature], Pres. of Venice Northgate Inc 3/15/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

James L. Turner