2004 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A97000002541

Entity Name: TOWN SQUARE AT SAINT JOHNS LIMITED

FILED Jan 12, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9995 GATE PARKWAY 9995 GATE PARKWAY N STE. 400 STE. 400

JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32246

Current Mailing Address: New Mailing Address:

9995 GATE PARKWAY 9995 GATE PARKWAY N STE. 400 STE. 400

JACKSONVILLE, FL 32246 JACKSONVILLE, FL 32246

FEI Number: 59-3480250 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KOEGLER, STEVEN C 9995 GATE PARKWAY 9995 GATE PARKWAY N STE. 400 STE. 400

JACKSONVILLE, FL 32246 US JACKSONVILLE, FL 32246 US

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.

SIGNATURE: 01/12/2004

Electronic Signature of Registered Agent Date

Capital Contributions as Shown on record: 5,300,000.00

Amount of Capital Contributions in Florida to date: 5,300,000.00

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #:

Name: AVENTURA/TOWN SQUARE,INC. Address: 9995 GATE PARKWAY STE. 400

Address: 9995 GATE PARKWAY STE. 400
City-St-Zip: JACKSONVILLE, FL 32246

Address: 9995 GATE PARKWAY N., STE. 400
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: STEVEN C. KOEGLER P 01/12/2004