


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

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

DOCUMENT # A97000002623 1. Entity Name HRCF BAYSIDE HOTEL LIMITED	
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Principal Place of Business 15500 ROOSEVELT BLVD., STE. 303 CLEARWATER, FL 33760	Mailing Address 15500 ROOSEVELT BLVD., STE. 303 CLEARWATER, FL 33760
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2. Principal Place of Business Suite, Apt #, etc	3. Mailing Address Suite, Apt #, etc
City & State	City & State
Zip	Country



01092004 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3480463	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HAYDON, ROGERS K JR 15500 ROOSEVELT BLVD., STE. 303 CLEARWATER, FL 33760	7. Name and Address of New Registered Agent Name Street Address (P O Box Number is Not Acceptable) City FL Zip Code
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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 \$1,600,000.00	10. Amount of Capital Contributions in FLORIDA to date
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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 CITY- ST- ZIP P97000077554 HR BAYSIDE HOTEL, INC. 15500 ROOSEVELT BLVD., STE. 303 CLEARWATER, FL 33760	STREET ADDRESS CITY- ST- ZIP
DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP P97000077413 CUTLER BAYSIDE HOTEL, INC. 35388 U S HWY 19 NORTH PALM HARBOR, FL 34684	STREET ADDRESS CITY- ST- ZIP
DOCUMENT # NAME STREET ADDRESS CITY- ST- ZIP P97000100552 FERRELL-JOHNSON, INC. 123 SOUTH CLYDE AVE. KISSIMMEE, FL 34741	STREET ADDRESS CITY- ST- ZIP
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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: ROGERS K HAYDON, JR. 4/23/04 727.539.0777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE