


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Mar 04, 2004 08:00 AM
Secretary of State

DOCUMENT # A98000000346		
1. Entity Name WATER'S EDGE PLAZA, LTD.		

Principal Place of Business 605 E. ROBINSON ST., #420 ORLANDO, FL 32801	Mailing Address 605 E. ROBINSON ST., #420 ORLANDO, FL 32801
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt #, etc.		Suite, Apt #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



02172004 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3491513	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
HANKINS, THOMAS E 112 EAST ANNIE STREET ORLANDO, FL 32806	

7. Name and Address of New Registered Agent	
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 _____
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9. Capital Contributions as Shown on record. \$1,800,000.00	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 #	P98000011645	STREET ADDRESS	
NAME	HFB PROPERTIES - WATER'S EDGE PLAZA, INC. ✓	CITY - ST - ZIP	000000087250
STREET ADDRESS	112 EAST ANNIE STREET		03/15/04-80002-016 526.25
CITY - ST - ZIP	ORLANDO, FL 32806		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
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STREET ADDRESS			
CITY - ST - ZIP			

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: <u>TEH</u> <u>Thomas E. Hankins</u> <u>2/25/04</u> <u>407-842-7070</u>

STAPLE CHECK HERE