

2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DU^E BY MAY 1, 2004

DOCUMENT # A98000001114

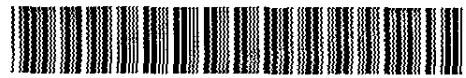
1. Entity Name

THE TURLEY FAMILY PARTNERSHIP, LTD.



FILED

Apr 09, 2004 08:00 AM
 Secretary of State



MOORE CR2E003 (11/03)

Principal Place of Business
 1465 S. FORT HARRISON AVENUE, SUITE 2
 CLEARWATER FL 33756

Mailing Address
 1465 S. FORT HARRISON AVENUE, SUITE 2
 CLEARWATER FL 33756

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

4. FEI Number 59-3519571	Applied For Nor Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
 NYP, TINA
 1465 S. FORT HARRISON AVENUE, SUITE 201
 CLEARWATER FL 33756

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

Signature, typed or printed name of registered agent and title if applicable

DATE

9. Capital Contributions as Shown on record.	\$20,000,000.00	10. Amount of Capital Contributions in FLORIDA to date.	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 #	P97000080224	STREET ADDRESS	
NAME	BEAR TREE, INC.	CITY-ST-ZIP	U000000114871
STREET ADDRESS	1465 S. FORT HARRISON AVENUE, SUITE 201		04/16/04-80001-015-528.25
CITY-ST-ZIP	CLEARWATER FL 33756		
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 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:

Stewart Turley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

727-443-4828

Daytime Phone #

STAPLE CHECK HERE