

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 APR 20 PM 3:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03102004 Chg-LP CR2E003 (10/03)

4. FEI Number **65-0849243** Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FRICKE, HENRY A ESQ.
101 PINEAPPLE GROVE WAY
DELRAY BEACH, FL 33444

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

9. Capital Contributions as Shown on record. **\$1,000.00** 10. Amount of Capital Contributions in FLORIDA to date. **\$1,000.00**

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

DOCUMENT # **P98000047207**
NAME **ROYAL PALM CORPORATE CENTER, INC.**
STREET ADDRESS **101 PINEAPPLE GROVE WAY**
CITY-ST-ZIP **DELRAY BEACH, FL 33444**

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY-ST-ZIP
700035807797
05/10/04--01051--011 **141.25

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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

ROYAL PALM CORPORATE CENTER, INC., a Florida corporation

SIGNATURE: By **Anthony V. Pugliese, III** 3-15-04 561-330-7000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER President Date Daytime Phone #

STAPLE CHECK HERE