


**2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004**

FILED
APR 05, 2004 08:00 AM
Secretary of State
FL

| | |
|---|---|
| DOCUMENT # A98000001981 1. Entity Name THE BACIG FAMILY LIMITED PARTNERSHIP |  |
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| Principal Place of Business 27391 OAK KNOLL DRIVE BONITA SPRINGS FL 34134 | Mailing Address 27391 OAK KNOLL DRIVE BONITA SPRINGS FL 34134 |
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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 |
|-----|---------|-----|---------|



MOORE CR2E003 (11/03)

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| 6. Name and Address of Current Registered Agent |
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| BACIG, LOUIS J 27391 OAK KNOLL DRIVE BONITA SPRINGS FL 34134 |
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| 7. Name and Address of New Registered Agent |
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| 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.

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|-----------|------|
| SIGNATURE | DATE |
|-----------|------|

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| 9. Capital Contributions as Shown on record. \$588,098.00 | 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.


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| 12. GENERAL PARTNER INFORMATION | 13. ADDRESS CHANGES ONLY |
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|---|---|----------------|--|
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | BACIG, LOUIS J 27391 OAK KNOLL DRIVE BONITA SPRINGS FL 34134 | STREET ADDRESS | |
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STAPLE CHECK HERE

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

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|--|------------------------------|
| SIGNATURE:  LOUIS J. BACIG | 4/1/04 (239) 992-2450 |
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