

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # A98000002327		
1. Entity Name LEECH INVESTMENTS, LTD.		

Principal Place of Business 2787 DICK WILSON DR. SARASOTA, FL 34240	Mailing Address 2787 DICK WILSON DR. SARASOTA, FL 34240
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
Zip	Country

02012004 Chg-LP CR2E003 (10/03)	
4. FEI Number 65-0870956	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DARNELL, ROBERT W 2033 MAIN STREET, SUITE 400 SARASOTA, FL 34237	
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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 _____	

9. Capital Contributions as Shown on record. \$1,000,000.00	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	
DOCUMENT #	NAME
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
DOCUMENT #	NAME
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
DOCUMENT #	NAME
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
DOCUMENT #	NAME
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
DOCUMENT #	NAME
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	CITY - ST - ZIP
STREET ADDRESS	STREET ADDRESS
CITY - ST - ZIP	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: X <i>John L. Leech</i> JOHN L. LEECH X	Date 4/26/04 (441) 341 0740
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	

STAPLE CHECK HERE