

**2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004**

DOCUMENT # A98000002491

1. Entity Name
THE BROWNSTEIN LIMITED PARTNERSHIP



FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



Principal Place of Business
1762 PIEDMONT COURT
MARCO ISLAND, FL 34145

Mailing Address
1762 PIEDMONT COURT
MARCO ISLAND, FL 34145

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

01202004 Chg-LP CR2E003 (10/03)

4. FEI Number
59-3540284

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**LONDON, ROBERT D.W. II
C/O DUNWODY WHITE & LONDON, P.A.
4001 TAMiami TRAIL NORTH, STE. 200
NAPLES, FL 34103**

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. **\$250,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **250,000.00**

**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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	P98000093232	STREET ADDRESS	
NAME	BROWNSTEIN, INC.	CITY-ST-ZIP	
STREET ADDRESS	1762 PIEDMONT COURT		800027900558
CITY-ST-ZIP	MARCO ISLAND, FL 34145		01/29/04--01/07/02--021 **\$26.25
DOCUMENT #		STREET ADDRESS	
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CITY-ST-ZIP			

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.

SIGNATURE: *Harold Brownstein* *Harold Brownstein* *1/29/04* *239 394 5576*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone