
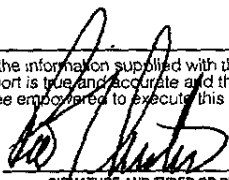


**2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004**

**FILED
Feb 05, 2004 08:00 AM
Secretary of State**

DOCUMENT # A98000002508					
1. Entity Name 9500 BUILDING, LTD.					
Principal Place of Business 2020 KING AIR COURT PORT ORANGE, FL 32128-6931			Mailing Address 2020 KING AIR COURT PORT ORANGE, FL 32128-6931		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0879455	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
9500 BUILDING, INC. 2020 KING AIR COURT PORT ORANGE, FL 32128-6931			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 _____ <small>Signature, typed or printed name of registered agent and file # applicable.</small>					
9. Capital Contributions as Shown on record. \$300,000.00			10. Amount of Capital Contributions in FLORIDA to date.		
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 #	P98000092908		STREET ADDRESS		
NAME	9500 BUILDING, INC. ✓		CITY-ST-ZIP		
STREET ADDRESS	2020 KING AIR COURT			U00000070648	
CITY-ST-ZIP	DAYTONA BEACH, FL 32128			02/26/04 00029 001 526.25	
DOCUMENT #			STREET ADDRESS		
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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 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: 			Peter T. AOSTEN GP. 1/29/04 386-761-1882		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date Daytona Phone #</small>		

STAPLE CHECK HERE