


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Apr 27, 2004 08:00 AM
Secretary of State

DOCUMENT # A98000002834

1. Entity Name
SAMHALL, LTD.



Principal Place of Business
4251 - 42ND AVENUE SOUTH
ST. PETERSBURG, FL 33711

Mailing Address
4251 - 42ND AVENUE SOUTH
ST. PETERSBURG, FL 33711



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

3. Mailing Address
 Suite, Apt #, etc

City & State

City & State

Zip Country

Zip Country

04162004 Chg-LP CR2E003 (10/03)

4. FEI Number
59-3547685

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

RAHALL, SAM G
4251 - 42ND AVENUE SOUTH
ST. PETERSBURG, FL 33711

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. **\$5,000,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **2,000,000** **\$ 526.25**

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 #	RAHALL, SAM G	STREET ADDRESS	
NAME	4251 - 42ND AVENUE SOUTH	CITY - ST - ZIP	
STREET ADDRESS	ST. PETERSBURG, FL 33711		U00000147066
CITY - ST - ZIP			05/03/04-80091-001 526.25
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
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: *Sam G Rahall* **4-21-04** **7278669962**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Day/Mo Phone #