


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

FILED
Apr 29, 2004 08:00 AM
Secretary of State

DOCUMENT # A99000000242			
1. Entity Name MAITLAND CONCOURSE PHASE I, LTD.			
Principal Place of Business 255 SOUTH ORANGE AVENUE, SUITE 905 ORLANDO FL 32801		Mailing Address P.O. BOX 1920 DALLAS TX 75221	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



MOORE CR2E003 (11/03)

4. FEI Number 75-2803079		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BATTAGLIA, W P 100 LINCOLN AVENUE WINTER PARK FL 32789		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 \$2,147,312.50	10. Amount of Capital Contribution in FLORIDA to date. #1,276,739.39	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
--	--	--

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 #	L99000000719	STREET ADDRESS	
NAME	BPL MAITLAND CONCOURSE PHASE I, LLC	CITY - ST - ZIP	
STREET ADDRESS	P.O. BOX 3010		
CITY - ST - ZIP	WINTER PARK FL 32790-3010		
DOCUMENT #	B99000000058	STREET ADDRESS	000000157862 05/06/04-80045-019 526.25
NAME	LINCOLN PROPERTY COMPANY NO. 2363, LTD.	CITY - ST - ZIP	
STREET ADDRESS	255 SOUTH ORANGE AVENUE, SUITE 905		
CITY - ST - ZIP	ORLANDO FL 32801		
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			

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:  **Leigh Ann Everett**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
Assistant Secretary **4-26-04** **214-740-4440**
Date Daytime Phone #

STAPLE CHECK HERE