

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

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

DOCUMENT # A99000000367

1. Entity Name
STERLING ROYAL OAKS LIMITED PARTNERSHIP



Principal Place of Business
ONE N. CLEMATIS ST., STE. 305
WEST PALM BEACH, FL 33401

Mailing Address
ONE N. CLEMATIS ST., STE. 305
WEST PALM BEACH, FL 33401

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04282004

Chg-LP

CR2E003 (10/03)

4. FEI Number
65-0908154

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

KOSOY, A. DAVID
ONE N. CLEMATIS ST., STE. 305
WEST PALM BEACH, FL 33401

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

Signature typed or printed name of registered agent and title if applicable

DATE

9. Capital Contributions
 as Shown on record

\$445,500.00

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

DOCUMENT # **P99000021398**
 NAME **STERLING X FLORIDA, INC.**
 STREET ADDRESS **ONE N. CLEMATIS ST., STE. 305**
 CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

000000157612
05/06/04-80034-012 535.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STERLING X Florida, Inc.

By: David D. Kosoy, 04-28-04 (561) 835-1810
President

Date

Daytime Phone #

STAPLE CHECK HERE