

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

FILED

04 AUG -4 AM 10:24

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MMH



07122004 Chg-LP CR2E003 (10/03)

8/4

4. FEI Number **58-2474578** Applied For ☐ Not Applicable ☐

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

F&L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202

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. **\$1,222,167.16**

10. Amount of Capital Contributions in FLORIDA to date.

\$926.25

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 #	M02000000813	STREET ADDRESS	
NAME	CAPE HOUSE PROPERTIES TWO GP, LLC	CITY-ST-ZIP	
STREET ADDRESS	11512 EL CAMINO REAL, SUITE 100		
CITY-ST-ZIP	SAN DIEGO, CA 92130		
DOCUMENT #		STREET ADDRESS	08/17/04--01077--005 **926.25
NAME		CITY-ST-ZIP	
STREET ADDRESS			100040263151
CITY-ST-ZIP			08/17/04--01077--005 **926.25
DOCUMENT #		STREET ADDRESS	
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Paul C. Christman, Jr.
CEO

8/3/04

Date

858-793-0202
Daytime Phone #