

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 MAY 11 PM 1:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A99000001308

1. Entity Name

RETREAT-SEMINOLE LIMITED PARTNERSHIP



Principal Place of Business

C/O HEARTHSTONE
16133 VENTURA BLVD., SUITE 1400
ENCINO, CA 91436

Mailing Address

C/O HEARTHSTONE
16133 VENTURA BLVD., SUITE 1400
ENCINO, CA 91436

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03172004

Chg-LP

CR2E003 (10/03)

4. FEI Number

95-4759870

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

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE, FL 32301

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.

9,416,776.12

10. Amount of Capital Contributions
in FLORIDA to date.

9,416,776.12

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 # L98000003194
NAME FL MSII/SEPII GP, L.C.
STREET ADDRESS 16133 VENTURA BLVD., SUITE 1400
CITY-ST-ZIP ENCINO, CA 91436

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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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:

SEE SIGNATURE BLOCK

4/21/04

818-385-0005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE

Form: 2004 UNIFORM BUSINESS REPORT

RETREAT-SEMINOLE, LIMITED PARTNERSHIP
A Florida Limited Partnership

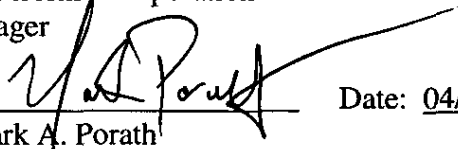
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

By: FL MS/SEP #2 GP, L.C.
A Florida Limited Liability Company
General Partner

By: Hearthstone
A California Corporation
Manager

By: 
Mark A. Porath
Chief Financial Officer
And Senior Vice President

Date: 04/20/04