## 2004 LIMITED PARTNER HIP ANNUAL REPORT Due By May 1, 2004

STAPLE CHECK HERE

DOCUMENT # A9900001367  1. Entity Name SPECTRUM COMMUNITY SERVICES, LTD.				FILED  04 JUN -7 PM 1:03					
Principal Place 845 PROTON SAN ANTONIO	ROAD	Mailing Address 845 PROTON ROAD SAN ANTONIO, TX 782			SECRETARY OF STAIL TALLAHASSEE, FLORIDA				
2. Principal P	lace of Business	3. Mailing Address	Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		04272004	Chg-LP	CR2E003 (1	0/03)	
City & State		City & State	City & State		4. FEI Number 74-292769	99		Applied For Not Applicable	
Zip	Country	Zip	Country		5. Conflicate of Status Desired S8.75 Additional Fee Required				
Name and Address of Current Registered Agent.				7. Name and Address of New Registered Agent					
DONATO, JUE WAGLOW, NANCY				N+	ANCY WA		- )		
5035 EDGEWATER DRIVE ORLANDO, FL 32810				<u>"5035</u>	ept Address (P.O. Box Number is Not Acceptable)				
	•				<del></del>				
	A	$\overline{}$		or or lo	in do		FL 5	32810	
8. The above named entity submits this statement for tife purbose of changing its registered office or registered agent, or both, in the State of Florida. 4 am familiar with, and accept the obligations of registered agent.									
SIGNATURE -	1 linei	1 1/2			<u> </u>		61410°	<u>t</u>	
9. Capital Contributions as Shown on record. \$2,757,150.00 10. Amount of Capital Contributions in FLORIDA to date.									
		TNER THAT IS A BUSINESS EN							
12.		PARTNER INFORMATION	13.	ii ailletiullieli	it fildst be lited to	ADDRESS CH			
DOCUMENT <b>#</b> NAME	M9900001307			ODRESS					
STREET ADDRESS	GLOUCESTER HOLDINGS LLC   845 PROTON ROAD			ZIP	700037979667				
CITY-ST-ZIP	SAN ANTONIO, TX 78258			ZIF	700037873667 				
DOCUMENT # NAME			STREET AC	ODRESS					
STREET ADDRESS CITY-ST-ZIP				ZIP					
DOCUMENT /				DDRESS					
STREET ADDRESS CITY-ST-ZIP				ZIP					
DOCUMENT #			STREET AL	DDRESS	<u></u>				
NAME STREET ADDRESS			CITY-ST-	710					
CITY-ST-ZIP			011 31 4						
DOCUMENT # NAME			STREET AL	DDRESS					
STREET ADDRESS  CITY-ST-ZIP			CITY-ST-	ZIP					
DOCUMENT /			STREET AC	DORESS		<del> </del>			
STREET ADDRESS CITY_ST-ZIP				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 employered to execute this report as required by Chapter 620, Florida Statutes  orthogon  (vo) 240 -1155									
SIGNATURE: MICHAREL A. HAWKER - TREASURER GLOWESTER POLDINGS, INC.  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER  Date  Date									