2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

FILED May 04, 2004 08:00 AM Secretary of State

DOCUMENT # A9900001574 1. Entity Name STANLEY J. NORTON LIMITED PARTNERSHIP					Secretary of State	
Principal Place of Business C/O STEEL HECTOR & DAVIS LLP-LAIRD A LILE 3003 TAMIAMI TRAIL N., STE. 300 NAPLES, FL 34103 Mailing Address C/O STEEL HECTOR & I 3003 TAMIAMI TRAIL N NAPLES, FL 34103			PAIL N., STE. (
2. Principal Pl	ace of Business	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt #, etc		04282004 Chg-LP	CR2E003 (10/03)	
City & State		City & State		4. FEI Number 65-0948147	Applied For Not Applicable	
Zip Country		Zip Country		itry	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent			7. Name and Address of New	
LILE, LAIRD A ESQ.				Name	700 A N	
C/O STEEL HECTOR & DAVIS LLP 3003 TAMIAMI TRAIL N., STE. 300 NAPLES, FL 34103				Street Address	(P.O. Box Number is Not Acceptab	
				City FL Zip Code		
	named entity submits this statement for	or the purpose of change	ing its register	ed office or registe	red agent, or both, in the State of F	
the obligati	ons of registered agent					
SIGNATURE -	Signature, ryped or printed name of registered again	and little if applicable				DATE
9. Capital Cor as Shown o	n record. \$2,400,000.00	10. Amount of in FLORID.	A to date.	72,40	TERED AND ACTIVE WITH T	\$526.25
	NOTE: General Partners MA	Y NOT be changed	on the forn	n; an amendmer	nt must be filed to change a	general partner. HANGES ONLY
12. DOCUMENT#				EET ABDRESS	ADDRESS CI	TANGES ONL!
NAME STREET ADDRESS CITY-ST-ZIP				r-SI-ZIF		
DOCUMENT #	WEST NEWBURY, MA 01985			LET ADDRESS		<u> </u>
NAME STREET ADDRESS CITY-ST-ZIP	NORTON, NOREEN M 5 RIVER ROAD WEST NEWBURY, MA 01985			Y-ST-ZIP	<u> </u>	
DOCUMENT #	NORTON, KIRSTEN E			LEET ADORESS		
name Street Address City-St-Zip				Y-ST-ZIP		
DOCUMENT #	NORTON, JR., STANLEY J TRUSTEE 5 RIVER ROAD WEST NEWBURY, MA 01985			REET ADDRESS		
STREET ADDRESS				V-ST-21P		
DOCUMENT # NAME			STE	ilén Adoress		
STREET ADDRESS CHTY-ST-ZIP			CH	Y-SI-21P		
DOCUMENT /			STE	REET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			Cit	Y-SI-ZIP		
14. I hereby of indicated	pertify that the information supplied will on this report is true and accurate an	th this filing boos not cu d that my signature shal	alify for the ex	emption stated in S re legal effect as if	Section 119 07(3)(i), Florida Statute made under oath; that I am a Gene	s. I further certify that the information eral Partner of the limited partnership of
the recen		us report as required by				2004 <i>97</i> 8337352