


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 APR 30 AM 8:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A99000001677		
1. Entity Name PARSONS INVESTMENTS, LTD.		

Principal Place of Business 5811 PELICAN BAY BOULEVARD, SUITE 600 NAPLES, FL 34108	Mailing Address 5811 PELICAN BAY BOULEVARD, SUITE 600 NAPLES, FL 34108
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

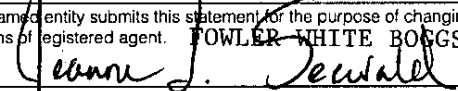


01202004 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3604581	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
FOWLER WHITE MYERS KRAUSE 5811 PELICAN BAY BLVD., STE. 600 NAPLES, FL 34108		Name FOWLER WHITE BOGGS BANKER P.A. Street Address (P.O. Box Number is Not Acceptable) 5811 Pelican Bay Blvd., Ste 600 City Naples FL Zip Code 34108	

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. FOWLER WHITE BOGGS BANKER P.A.	
SIGNATURE 	JEANNE L. SEEWALD, ESQUIRE 4-23-04

9. Capital Contributions as Shown on record. \$10,000,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$10,000,000.00
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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 # NAME STREET ADDRESS CITY-ST-ZIP	P99000090107 PARSONS INVESTMENTS, INC. 5811 PELICAN BAY BLVD., STE 600 NAPLES, FL 34108	STREET ADDRESS CITY-ST-ZIP	
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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: 	MEREDITH P. SALISBURY 3/29/04

STAPLE CHECK HERE