
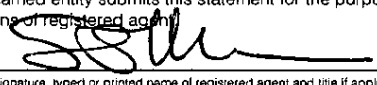
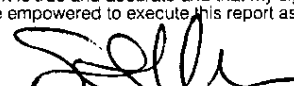


2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A99000002250 1. Entity Name CELTIC TIGER PARTNERSHIP, LTD., LLP					
Principal Place of Business 209 WEST RIDGEWOOD COURT LONGWOOD, FL 32779			Mailing Address 209 WEST RIDGEWOOD COURT LONGWOOD, FL 32779		
2. Principal Place of Business 225 West Lake Faith Drive Suite, Apt. #, etc.		3. Mailing Address 225 West Lake Faith Drive Suite, Apt. #, etc.			
City & State Maitland, Florida Zip 32751 Country USA		City & State Maitland, Florida Zip 32751 Country USA		4. FEI Number 59-3614533	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent BARRY, STEPHEN T 209 WEST RIDGEWOOD COURT LONGWOOD, FL 32779			7. Name and Address of New Registered Agent Name Barry, Stephen T. Street Address (P.O. Box Number is Not Acceptable) 225 West Lake Faith Drive City Maitland FL Zip Code 32751		
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 4-26-04 <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$2,500,600.00		10. Amount of Capital Contributions in FLORIDA to date. \$2,500,600.00		\$526.25	
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 # L99000009311 NAME DIAMOND LIL PROPERTIES, LLC STREET ADDRESS 209 WEST RIDGEWOOD COURT CITY-ST-ZIP LONGWOOD, FL 32779			STREET ADDRESS 225 West Lake Faith Drive CITY-ST-ZIP Maitland, Florida 32751		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS 000036050450 CITY-ST-ZIP 05/11/04--01033--005 **526.25		
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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 receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes. SIGNATURE:  STEPHEN T. BARRY 4-26-04 407-862-0360 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> <small>Date</small> <small>Daytime Phone #</small>					

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