

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

DOCUMENT # B00000000209 1. Entity Name ARDENT MANAGEMENT L.P.					
Principal Place of Business 1601 BELVEDERE RD SUITE 407 SOUTH WEST PALM BEACH, FL 33406			Mailing Address 1601 BELVEDERE RD SUITE 407 SOUTH WEST PALM BEACH, FL 33406		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number 59-2651087				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MEYER, ARTHUR I 1601 BELVEDERE RD SUITE 407 S WEST PALM BEACH, FL 33406			7. Name and Address of New Registered Agent Name PAUL MAPES Street Address (P.O. Box Number is Not Acceptable) 1601 BELVEDERE ROAD Suite 407 South City West Palm Beach FL Zip Code 33406		
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 <u><i>Paul Mapes</i></u> C.F.O. 4/21/04 DATE					
9. Capital Contributions as Shown on record. \$0.00		10. Amount of Capital Contributions in FLORIDA to date.			
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		
NAME	MEYER, ARTHUR I		CITY-ST-ZIP		
STREET ADDRESS	1601 BELVEDERE RD SUITE 407 SOUTH				
CITY-ST-ZIP	WEST PALM BEACH, FL 33406				
DOCUMENT #			STREET ADDRESS	100036060911	
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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: <u><i>Arthur Meyer</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			4/21/04 (561)689-6601 <small>Date Daytime Phone #</small>		

FILED

04 APR 30 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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