2094 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

FILED Apr 26, 2004 08:00 AM Secretary of State

		May 1, 2004			Secre	tary (of State
DOCUMENT # B0000000333 1. Entity Name WESTPORT HOLDINGS BRADENTON, LIMITED PARTNERSHIP					Secretary of State		
Principal Place of I	Business	Mailing Address		·			
3801 PGA BLVD., SUITE 805		6501 17TH AVENUE	6501 17TH AVENUE WEST BRADENTON, FL 34209				
2. Principal Place	of Business	3. Mailing Address		<u>*</u>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #. etc.		03292004 Chg-LP	CR2E00	3 (10/03)
City & State		City & State	City & State		4. FEI Number 65-1059077		Applied For Not Applicab
Zip	Country	Zip	Cour	ntry	5. Certificate of Status Desired		8.75 Additional ee Required
6	i. Name and Address of Curi	rent Registered Agent			7. Name and Address of New R	egistered Ag	ent
LANDRY, LAWRENCE L				Name Street Address (P.O. Box Number is Not Acceptable)			
3801 PGA BLVD., SUITE 805 PALM BEACH GARDENS, FL 33410					<u>, , , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · · · ·	
				City		FL	Zip Code
	ned entity submits this stateme of registered agent.	ent for the purpose of changing if	ts register	ed office or register	ed agent, or both, in the State of Fic	rida. I am fa	miliar with, and accep
SIGNATURE	iture, typed or printed name of registered	scent and life if applicable	· 	<u> </u>	<u> </u>	DATE	
9. Capital Contrib	utions may see 700 or	10. Amount of Can		butions			
	A GENERAL PARTNE	ER THAT IS A BUSINESS E	NTITY N	NUST BE REGIST	TERED AND ACTIVE WITH THat must be filed to change a ge	IS OFFICE	ner.
12.		TNER INFORMATION	13.		ADDRESS CHA		
	M00000002230 WESTPORT HOLDINGS FREEDOM VILLAGE, L.L.C.		STR	HET ADDRESS			
: I	01 PGA BLVD., SUITE 805 LM BEACH GARDENS, F		Clin	(-ST-ZIP			·
DOCUMENT # NAME			STA	EET ADORESS	U00000145278 		
STREET ADDRESS CITY+ST-ZIP			CUL	r-St-ZIP			
DOCUMENT #			STR	EFT ADDRESS		<u></u>	*
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NAME			STR	EET ADDRESS		- <u>-</u> -	
STREET ADDRESS CITY-ST-ZIP	·	·	cm	r-57-ZIP	<u> </u>	<u> </u>	<u> </u>
DOCUMENT # NAME STREET ADDRESS				EET ADORESS		<u> </u>	<u> </u>
CITY-ST-ZIP		<u></u>	1	Y-SY-ZIP			<u> </u>
14. I hereby certifindicated on the receiver of	y that the information supplied his report is true and accurate r trustee empowered to kecu	, ,	for the exere the sam apter 620.		ection 119.07(3)(i), Florida Statutes, nade under oath; that I am a Genera	I further certiful Partner of ti	y that the information ne limited partnership