

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED
Feb 13, 2004 08:00 AM
Secretary of State

DOCUMENT # B00000000350	
1. Entity Name THE HEWITT FAMILY LIMITED PARTNERSHIP	

Principal Place of Business C/O PAT BOYLE 2600 HIGH TERRACE RENO, NV 89509	Mailing Address C/O MACLEAN AND EMA 2600 N.E. 14TH STREET CAUSEWAY POMPANO BEACH, FL 33062
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country

	
01132004 Chg-LP	CR2E003 (10/03)
4. FEI Number 88-0468965	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MACLEAN, LAURA G ESQ. 2600 N.E. 14TH STREET CAUSEWAY POMPANO BEACH, FL 33062	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 _____
Signature, typed or printed name of registered agent and file if applicable.

9. Capital Contributions as Shown on record. \$260,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 #	F00000006277	STREET ADDRESS	
NAME	HEWITT CORPORATION, INC.	CITY-ST-ZIP	
STREET ADDRESS	1725 MARSH RUN		
CITY-ST-ZIP	NAPLES, FL 34109		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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STREET ADDRESS			
CITY-ST-ZIP			

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: PETER HEWITT 2/3/04 239-598-9996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE