


**2004 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2004**

**FILED  
Mar 29, 2004 08:00 AM  
Secretary of State**

DOCUMENT # B01000000171	
1. Entity Name PELICAN VILLAGE, LP	

Principal Place of Business 24830 S. TAMIAMI TRAIL BONITA SPRINGS, FL 34134-1950	Mailing Address 24830 S. TAMIAMI TRAIL BONITA SPRINGS, FL 34134-1950
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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03022004 Chg-LP CR2E003 (10/03)

4. FEI Number  
35-2139512

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
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C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

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 title if applicable

9. Capital Contributions as Shown on record. \$99.00	10. Amount of Capital Contributions in FLORIDA to date. 99.00	141.25
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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	F01000002616 PELICAN VILLAGE MANAGEMENT, INC. 201 N. ILLINOIS STREET, 23RD FLOOR INDIANAPOLIS, IN 462041950	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	000000104345 04/06/04-300006-004 141.25
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STAPLE CHECK HERE

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 Joyce A. Bradley Pelican Village Mgmt Co (317)  
by Joyce A. Bradley 3/11/04 237-2900  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #