

# 2004 LIMITED PARTNERSHIP ANNUAL REPORT

Due By September 8, 2004

DOCUMENT # B01000000362

1. Entity Name  
ZS SERVICE CHAMP L.P.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 OCT 11 AM 7:35

Principal Place of Business  
54 MORRIS LANE  
SCARSDALE, NY 10583

Mailing Address  
54 MORRIS LANE  
SCARSDALE, NY 10583

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

07062004 Chg-LP CR2E003 (10/03)

4. FEI Number  
13-4190289

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

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

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

DATE

9. Capital Contributions  
as Shown on record \$2.00

\$7,286,503

10. Amount of Capital Contributions  
in FLORIDA to date.

\$798,601

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

DOCUMENT # M01000002359  
NAME ZS SERVICE CHAMP L.L.C.  
STREET ADDRESS 54 MORRIS LANE  
CITY-ST-ZIP SCARSDALE, NY 10583

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS  
CITY-ST-ZIP 10/11/04--01003--019 \*\*526.25

STREET ADDRESS  
CITY-ST-ZIP 300041773483

STREET ADDRESS  
CITY-ST-ZIP 10/11/04--01003--019 \*\*526.25

STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP AR 526.25

STREET ADDRESS  
CITY-ST-ZIP Supp. Ass. 1,750.00

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:

Robert Hurne

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Robert Hurne

9/7/04

Date

2123986200

Daytime Phone #

STAPLE CHECK HERE