

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

**DOCUMENT # B03000000342**



1. Entity Name  
**FLORIDA GROUP HOMES INVESTMENTS, LTD.**

Principal Place of Business  
**845 PROTON ROAD  
SAN ANTONIO, TX 78258**

Mailing Address  
**845 PROTON ROAD  
SAN ANTONIO, TX 78258**

**FILED**

**04 MAY -3 PM 6:30**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**04272004**

**Chg-LP**

**CR2E003 (10/03)**

4. FEI Number

**71-0916691**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**WAGLOW, NANCY  
5035 EDGEWATER DRIVE  
ORLANDO, FL 32810**

**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.

**\$1,515,483.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

**\$11.**

**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 # **F03000002389**  
NAME **CARDIFF HOLDINGS, INC.**  
STREET ADDRESS **845 PROTON ROAD**  
CITY-ST-ZIP **SAN ANTONIO, TX 78258**

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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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**Michael A. Hawker - TREASURER CARDIFF HOLDINGS, INC.**

Date

Daytime Phone #

**04/28/04**

**(210) 340-7155**

STAPLE CHECK HERE