

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

**FILED**  
**Feb 05, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # B93000000427**

1. Entity Name  
**LANDMARK LTM COMPANY, L.P., A VIRGINIA LIMITED PARTNERSHIP**



Principal Place of Business  
**150 WEST BRAMBLETON AVENUE  
 NORFOLK, VA 23510**

Mailing Address  
**150 WEST BRAMBLETON AVENUE  
 NORFOLK, VA 23510**

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

Zip Country



01162004 Chg-LP CR2E003 (10/03)

4. FEI Number  
**54-1589296**

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION, FL 33324**

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 title if applicable.

9. Capital Contributions as Shown on record: **\$0.00**

10. Amount of Capital Contributions in FLORIDA to date: **\$141.25**

**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 #<br><b>P33474</b>                       | NAME<br><b>LTM HOLDINGS, INC.</b> | STREET ADDRESS           |                                  |
| STREET ADDRESS<br><b>150 WEST BRAMBLETON AVE.</b> |                                   | CITY-ST-ZIP              |                                  |
| CITY-ST-ZIP<br><b>NORFOLK, VA 23510</b>           |                                   |                          | <b>U000000070586</b>             |
|   |                                   |                          | <b>02/28/04-80028-003 141.25</b> |
| DOCUMENT #  | NAME                              | STREET ADDRESS           |                                  |
| STREET ADDRESS                                    |                                   | CITY-ST-ZIP              |                                  |
| CITY-ST-ZIP                                       |                                   |                          |                                  |
| DOCUMENT #  | NAME                              | STREET ADDRESS           |                                  |
| STREET ADDRESS                                    |                                   | CITY-ST-ZIP              |                                  |
| CITY-ST-ZIP                                       |                                   |                          |                                  |
| DOCUMENT #  | NAME                              | STREET ADDRESS           |                                  |
| STREET ADDRESS                                    |                                   | CITY-ST-ZIP              |                                  |
| CITY-ST-ZIP                                       |                                   |                          |                                  |
| DOCUMENT #  | NAME                              | STREET ADDRESS           |                                  |
| STREET ADDRESS                                    |                                   | CITY-ST-ZIP              |                                  |
| CITY-ST-ZIP                                       |                                   |                          |                                  |
| DOCUMENT #  | NAME                              | STREET ADDRESS           |                                  |
| STREET ADDRESS                                    |                                   | CITY-ST-ZIP              |                                  |
| 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: **Steven J. Goetz, Assistant Secretary, LTM Holdings, Inc.**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER **General Partner** Date **1/20/04** Phone # **757-446-2013**

STAPLE CHECK HERE