2004 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2004

APPROVES AND FILED

DOCUMENT # B9400000114 1. Entity Name CHALLENGER CAPITAL MANAGEMENT, L.P., LIMITED PARTNERSHIP				04 MAY -4 PM 4: 26 SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business 2640 GOLDEN GATE PARKWAY 205 NAPLES, FL 34105 Mailing Address 2640 GOLDEN GATE PARKWAY 205 NAPLES, FL 34105			KWAY	A TREATURE TRADE FORM REAL REAL REAL REAL REAL REAL REAL REAL
2. Principal Place of Business CONMM Florida Holdings Luc CONMM Florida Holdings Luc CONMM Florida Hol				
Suite, Apt. #, etc. PO Box 1417 Suite, Apt. #, etc. PO Box 1417			04272004 Chg-LP CR2E003 (10/03)	
City & State City & State		Holmes Beac	h FL	4. FEI Number Applied For 62-1512092 Not Applicat
3421		<u> </u>	USA.	5. Certificate of Status Desired
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent	
LJH GLOBAL INVESTMENTS L.L.C.				dress (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. \$62,500.00 10. Amount of Capital Contributions in FLORIDA to date. \$2,500.00				
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	RINFORMATION	13.	ADDRESS CHANGES ONLY
DOCUMENT # NAME	M94000000018 LJH GLOBAL INVESTMENTS, L.	NOTE: General Partners MAY NOT be changed on the defended on the defendance of the second of the sec		
STREET ADDRESS CITY-ST-ZIP	2640 GOLDEN GATE PARKWAY NAPLES, FL 34105	,	Country S. Certificate of Status Desired T. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code gistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept DATE TY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.	
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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

4/29/04 239,403.3030