2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

FILED

04 MAY -5 PM 1:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # B94000000190

1. Entity Name
ANNA MARIA ASSOCIATES, LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
570 DELAWARE AVENUE BUFFALO, NY 14202	570 DELAWARE AVENUE BUFFALO, NY 14202

01202004 Chg-LP CR2E003 (10/03)

2. Principal Place of Business	3. Mailing Address
8441 COOPER CREEK BLVD	8441 COOPER CREEK BLVD
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: UNIVERSITY PARK FL	City & State: UNIVERSITY PARK FL
Zip: 34201 Country:	Zip: 34201 Country:

4. FEI Number 16-1451248 ☐ 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. $9,900.00

10. Amount of Capital Contributions in FLORIDA to date.

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 #	L93000000382	STREET ADDRESS	8441 COOPER CREEK BLVD
NAME	BENDERSON-MANATEE, L.C.		
STREET ADDRESS	570 DELAWARE AVENUE	CITY-ST-ZIP	UNIVERSITY PARK FL 34201
CITY-ST-ZIP	BUFFALO, NY 14202		
DOCUMENT #		STREET ADDRESS	
NAME			200037572402
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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: David A Baldauf DAVID H. BALDAUF MGR OF GP 4/22/2004 941.359.8303
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

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