


2004 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2004

DOCUMENT # B94000000408	
1. Entity Name SOUTHEAST BRITTANY/BAY CLUB LIMITED PARTNERSHIP	

Principal Place of Business C/O NORTHLAND INVESTMENT CORP. 2150 WASHINGTON ST. NEWTON MA 02462	Mailing Address C/O NORTHLAND INVESTMENT CORP. 2150 WASHINGTON ST. NEWTON MA 02462
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

FILED
2004 FEB 20 PM 3:37
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



MOORE CR2E003 (11/03)

4. FEI Number 04-3247705	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent	
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET, SUITE 105 TALLAHASSEE FL 32301	
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. \$1,213,816.00	10. Amount of Capital Contributions in FLORIDA to date.	11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION
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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 #	F02000000137	STREET ADDRESS	
NAME	SOUTHERN TIER BRITTANY INCORPORATED	CITY-ST-ZIP	
STREET ADDRESS	2150 WASHINGTON STREET		
CITY-ST-ZIP	NEWTON GA 02642		
DOCUMENT #		STREET ADDRESS	500030062235
NAME		CITY-ST-ZIP	03/09/04--01020--007 ***3352.50
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CITY-ST-ZIP			

\$526.25

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 S. Gator, President* **DATE:** *1/23/04* **DAYTIME PHONE #:** *617.965.7100*

STAPLE CHECK HERE