

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

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # B94000000465

1. Entity Name  
WYE PARTNERS, LTD.



Principal Place of Business  
250 WASHINGTON STREET  
PRATTVILLE, AL 36067

Mailing Address  
P.O. BOX 680176  
PRATTVILLE, AL 36068



01152004 Chg-LP CR2E003 (10/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
63-1131668

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUGHES, J. ROBERT ESQ.  
220 MCKENZIE AVENUE  
PANAMA CITY, FL 32401

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.

\$1,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

\$1,000

**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 # F97000004955  
NAME N.O.M. PROPERTIES, INC.  
STREET ADDRESS 250 WASHINGTON STREET  
CITY-ST-ZIP PRATTVILLE, AL 36067

STREET ADDRESS  
CITY-ST-ZIP

400027621244  
01/26/04--01091--012 \*\*141.25

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STREET ADDRESS  
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:

*Thomas E Newton*  
Thomas E Newton, President

Date

1/21/04

Daytime Phone #

334-361-8500

STAPLE CHECK HERE