

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

DOCUMENT # B96000000206

1. Entity Name
PREFERRED HAWAIIAN, L.P., LIMITED PARTNERSHIP



FILED

2004 AUG 20 P 1:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**ONE NORTH CLEMATIS STREET, SUITE 305
WEST PALM BEACH, FL 33401**

Mailing Address
**ONE NORTH CLEMATIS STREET, SUITE 305
WEST PALM BEACH, FL 33401**

2. Principal Place of Business
2950 REEDY CREEK BLVD

3. Mailing Address
2950 REEDY CREEK BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

08112004 Chg-LP CR2E003 (10/03)

City & State
KISSIMMEE FL

City & State
KISSIMMEE FL

4. FEI Number
93-1209236

Applied For
Not Applicable

Zip
34747

Country
USA

Zip
34747

Country
USA

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

6. Name and Address of Current Registered Agent

**DAVID J. WIENER, P.A.
ONE NORTH CLEMATIS STREET, SUITE 305
WEST PALM BEACH, FL 33401**

7. Name and Address of New Registered Agent

Name **JOE LONGO**

Street Address (P.O. Box Number is Not Acceptable)
2950 REEDY CREEK BLVD

City **KISSIMMEE**

FL

Zip Code
34747

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 **JOE LONGO** **JOE LONGO CORPORATE CONTROLLER**

DATE
8/16/04

9. Capital Contributions as Shown on record. **\$2,902,878.00**

10. Amount of Capital Contributions in FLORIDA to date.

**437.50 + 88.75 + 400.00 + 8.75
= \$ 935.00**

**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 INFORMATION

DOCUMENT # **F96000002846**
NAME **PREFERRED HAWAIIAN, INC.**
STREET ADDRESS **ONE NORTH CLEMATIS STREET, SUITE 305**
CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

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CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS **2950 REEDY CREEK BLVD**

CITY-ST-ZIP **KISSIMMEE FL 34747**

STREET ADDRESS
CITY-ST-ZIP

**800040651838
08/31/04--01004--022 **935.00**

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

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: **GRANT B McPHAIL**

GRANT B McPHAIL

DATE
8/16/04

DAYTIME PHONE #
949.369-9722

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE