

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

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

04 MAR 15 AM 10:30

**DOCUMENT # B96000000340**

1. Entity Name  
 ORANGE PINE LIMITED PARTNERSHIP



Principal Place of Business <b>17 WEST PENNSYLVANIA AVE., SUITE 500                  TOWSON, MD 21204</b>	Mailing Address <b>17 WEST PENNSYLVANIA AVENUE, SUITE 500                  ATTN: BILL KINNEAR                  TOWSON, MD 21204</b>
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2. Principal Place of Business <b>1427 Clarkview Rd.                  Suite, Apt. #, etc. <b>Suite 500</b>                  City &amp; State <b>Baltimore, MD</b>                  Zip <b>21209</b> Country</b>	3. Mailing Address <b>1427 Clarkview Rd.                  Suite, Apt. #, etc. <b>Suite 500</b>                  City &amp; State <b>Baltimore, MD</b>                  Zip <b>21209</b> Country</b>
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03032004 Chg-LP CR2E003 (10/03)

4. FEI Number <b>52-1991566</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**NAPLES LAWDOK, INC.  
 4501 TAMiami TRAIL N., SUITE 300  
 NAPLES, FL 34103-3060**

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. <b>\$534,000.00</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>534,000.00</b>
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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 #	F96000004447	STREET ADDRESS	<b>1427 Clarkview Rd. Suite 500</b>
NAME	ORANGE PINE, INC.	CITY-ST-ZIP	<b>Baltimore, MD 21209</b>
STREET ADDRESS	17 WEST PENNSYLVANIA AVE., SUITE 500		
CITY-ST-ZIP	TOWSON, MD 21204		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	<b>300031758713</b>
STREET ADDRESS			<b>04/02/04--01079--018 **526.25</b>
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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:** By: **William H. Kinnear, Jr.** VP **3/8/04** **410-296-4800**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #