2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2004

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

DOCUMENT # B97000000197

1. Entity Name
NORTHLAND PLANTATION CLUB PORTFOLIO LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
2150 WASHINGTON STREET NEWTON, MA 02462	2150 WASHINGTON STREET NEWTON, MA 02462

01282004 . 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: 04-3364202 ☐ 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 ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. $1,650,000.00

10. Amount of Capital Contributions in FLORIDA to date. 0

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 #	B97000000196	STREET ADDRESS	
NAME	NORTHLAND PLANTATION CLUB PARTNERS L.P.		
STREET ADDRESS	2150 WASHINGTON STREET	CITY-ST-ZIP	800030062208 03/09/04--01020--007 **3352.50
CITY-ST-ZIP	NEWTON, MA 02462		
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STREET ADDRESS		CITY-ST-ZIP	$141.25
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.

By: Northland Plantation Club Partners, Inc., general Partner

SIGNATURE: By: [signature] 1/30/04 617-965-7100
Robert B. Gatof, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #