

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

FILED


04 APR 21 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK



MOORE CR2E003 (11/03)

DOCUMENT # B97000000350					
1. Entity Name OM FUND I PARTNERS, L.P.					
Principal Place of Business 5080 SPECTRUM DRIVE, SUITE 1050-E ADDISON TX 75001			Mailing Address 5080 SPECTRUM DRIVE, SUITE 1050-E ADDISON TX 75001		
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 75-2643276	
				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			7. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record.		\$674,108.00		10. Amount of Capital Contributions in FLORIDA to date. \$674,108.00	
11. MAKE CHECK PAYABLE TO FL. DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION					
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 #	F97000003677		STREET ADDRESS		
NAME	OM, INC.		CITY-ST-ZIP		
STREET ADDRESS	5080 SPECTRUM DRIVE, SUITE 1050-E			100034381491	
CITY-ST-ZIP	ADDISON TX 75001			04/28/04--01019--027 **526.25	
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
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NAME			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: SEE ATTACHED SIGNATURE PAGE

972-980-2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE

B97000000350

Signature Addendum
to

2004 Limited Partnership Annual Report – FL

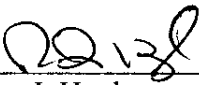
Dated: March 29, 2004

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OM FUND I PARTNERS, L.P.,
a Texas limited partnership

By: OM, Inc.,
a Delaware corporation,
its general partner

By:



Ron J. Hoyl
Vice President

