

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

FILED
May 14, 2004 08:00 AM
Secretary of State

DOCUMENT # B98000000236

1. Entity Name

PLANGERE PARTNERS, L.P.



Principal Place of Business

3829 PARTRIDGE PLACE
BOYNTON BEACH FL 33436

Mailing Address

3829 PARTRIDGE PLACE
BOYNTON BEACH FL 33436

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

52-2060939

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

PLANGERE, JULES L JR.
3829 PARTRIDGE PLACE SOUTH - QUAIL RIDGE
BOYNTON BEACH FL 33436

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

\$396,000.00

10. Amount of Capital Contributions
in FLORIDA to date.

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 # M98000000356
NAME JJP, L.L.C.
STREET ADDRESS 3829 PARTRIDGE PLACE SOUTH - QUAIL RIDGE
CITY - ST - ZIP BOYNTON BEACH FL 33436

STREET ADDRESS

CITY - ST - ZIP

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U00000160873
05/18/04-80003-019 526.25

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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:

Jules L. Plangere, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-14-04

Date

732/251-1119

Daytime Phone #

STAPLE CHECK HERE