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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 MAR -4 AM 11:57
REC'D FEB 02 2004

MOORE CR2E003 (11/03)

DOCUMENT # B98000000426

1. Entity Name
GARDEN PLAZA LIMITED PARTNERSHIP OF PARADISE

Principal Place of Business	Mailing Address
P.O. BOX 137 GREENDALE WI 53124-0137	P.O. BOX 137 GREENDALE WI 53124-0137

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 39-1709240 ☐ 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
FORLIZZO, ROBERT A 2903 RIGSBY LANE SAFETY HARBOR FL 34695	Name Street Address (P.O. Box Number is Not Acceptable) 000030595240 03/17/04--01011--013 **526.25 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.	$264,000.00	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 #			
NAME	SCHLYTTER, ROBERT O SR.	STREET ADDRESS	P. O. Box 137 (5111 S. 76th Street 2nd FL
STREET ADDRESS	5111 S. 76TH STREET		
CITY-ST-ZIP	GREENDALE WI 53129-0137	CITY-ST-ZIP	Greendale, WI 53129-0137
DOCUMENT #			
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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: Robert O. Schlytter ROBERT O. SCHLYTTER 3/1/2004 414/281-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #