


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

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 04 APR 12 AM 10:38

**DOCUMENT # B98000000429**

1. Entity Name  
 ROSEBAY INVESTORS LP



Principal Place of Business  
 9198 GREENBACK LANE  
 SUITE 115  
 ORANGEVILLE, CA 95662

Mailing Address  
 9198 GREENBACK LANE  
 SUITE 115  
 ORANGEVILLE, CA 95662

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



03252004 Chg-LP CR2E003 (10/03)

4. FEI Number 93-1194092	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

WEBB, RICHARD S IV, ESQ  
 2 NORTH TAMiami TRAIL SUITE 500  
 SARASOTA, FL 34236

7. Name and Address of New Registered Agent

Name *Webb, Richard S IV, ESQ*

Street Address (P.O. Box Number is Not Acceptable)  
*2033 Main Street Suite 600*

City *Sarasota* FL Zip Code *34237*

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. \$354,362.00	10. Amount of Capital Contributions in FLORIDA to date. <i>4/5/04</i>
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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 # NAME STREET ADDRESS CITY - ST - ZIP	M98000000692 ROSEBAY MANAGEMENT LLC 9198 GREENBACK LANE ORANGEVILLE, CA 95662	STREET ADDRESS CITY - ST - ZIP	
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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: *Leei Brenning* *Leei Brenning, Manager* *4/5/04* *916/989-2800*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE