

2004 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 8, 2004

FILED

04 JUN 10 PM 3:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # B99000000276



1. Entity Name
CARLISLE EQUIPMENT GROUP, L.P.

Principal Place of Business
1165 CAMP HOLLOW ROAD
WEST MIFFLIN, PA 15122

Mailing Address
1165 CAMP HOLLOW ROAD
WEST MIFFLIN, PA 15122

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
800 Waterfront Drive

Suite, Apt. #, etc.
800 Waterfront Drive

City & State
Pittsburgh PA

City & State
Pittsburgh PA

Zip Country
15222 USA

Zip Country
15222 USA

06042004 Chg-LP CR2E003 (10/03)

4. FEI Number
25-1838409

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record. \$1,570.00

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

DOCUMENT # M99000001072
NAME CARLISLE GP, L.L.C.
STREET ADDRESS 1165 CAMP HOLLOW ROAD
CITY-ST-ZIP WEST MIFFLIN, PA 15122

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CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

800 Waterfront Drive

CITY-ST-ZIP

Pittsburgh, PA 15222

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

900037869119

CITY-ST-ZIP

06/11/04 01021 024 **141.25

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

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: *Ronald M. Marmo*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

RONALD M. MARMO 5/25/04

Date

Daytime Phone #

(412) 320
4900

STAPLE CHECK HERE