2004 LIMITED PARTNERSHIP ANNUAL REPORT

FILED **Due By May 1, 2004** DOCUMENT # B99000000434 2004 APR 27 A 9: 39 TERRABROOK APOLLO BEACH, L.P. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 3030 LBJ FREEWAY, SUITE 1500 3030 LBJ FREEWAY DALLAS, TX 75234 LB-6, SUITE 1500 DALLAS, TX 75234 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01302004 Chg-LP CR2E003 (10/03) City & State City & State 4 FEI Number Applied For 75-2849295 Not Applicable Ζip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 10. Amount of Capital Contributions \$26,470,877.12 as Shown on record. \$52,136,185.39 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 ADDRESS CHANGES ONLY 13. M99000001912 DOCUMENT # STREET ADORESS NAME TERRABROOK APOLLO BEACH GP. L.L.C. STREET ADDRESS 3030 LBJ FREEWAY, SUITE 1500 CITY-ST-ZIP CITY-ST-ZIP DALLAS, TX 75234 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP <u>400034071744</u> 04/27/04--01036--012 **2276.25 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP \$606°25 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME 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

TERRABROOK APOLLO BEACH GP L.L.C., its General Partner

L.L.C., its General Partner

SCOT Scott H. Raskin, AVP SIGNATURE: By: 3/22/04 972-443-6000