

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90119 022 ****55.00

DOCUMENT # L99000001507

1. Entity Name
FAIRGROUNDS HOLDING GP LLC



Principal Place of Business
**C/O GOODMAN PROPERTIES, INC.
777 SOUTH FLAGLER DRIVE, SUITE 1101E
WEST PALM BEACH, FL 33401**

Mailing Address
**C/O GOODMAN PROPERTIES, INC.
777 SOUTH FLAGLER DRIVE, SUITE 1101E
WEST PALM BEACH, FL 33401**



02032004 No Chg-LLC

CR2E083 (10/03)

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4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SHEWALTER, WILLIAM A
C/O GOODMAN PROPERTIES, INC.
777 SOUTH FLAGLER DRIVE, SUITE 1104
WEST PALM BEACH, FL 33401**

**DO NOT WRITE
IN THIS SPACE**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	GOODMAN PROPERTIES, INC.
STREET ADDRESS	777 SOUTH FLAGLER DRIVE, SUITE 1104
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	M
NAME	GOODMAN, MURRAY H
STREET ADDRESS	777 SOUTH FLAGLER DRIVE, SUITE 1101E
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

William A. Shewalter
Goodman Properties Inc., manager
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/30/04
Date

561-833-3777
Daytime Phone #

William A. Shewalter, Vice President