

**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2005**

DOCUMENT # A00000001114
1. Entity Name
VOGEL FAMILY PROPERTIES, LTD.



FILED
2005 MAY -2 PM 1:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business: **6210 BRANDON ST. WEST PALM BCH FL 33418-1489**
Mailing Address: **6210 BRANDON ST. WEST PALM BCH FL 33418-1489**

2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: Suite, Apt. #, etc.

City & State

Zip Country Zip Country

4. FEI Number **59-3658366** Applied For Not Applicable

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

1ST MOORE CR2E003 (10/04)

6. Name and Address of Current Registered Agent
VOGEL, BARRY J
604 WESTBORG LN
SAFETY HARBOR FL 34695

7. Name and Address of New Registered Agent
Name **BARRY J. VOGEL**
Street Address (P.O. Box Number is Not Acceptable) **127 V/A BOSQUE**
City **JUPITER** FL Zip Code **33458**

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 *Barry J. Vogel* **BARRY J. VOGEL** **04/01/2005**
Signature, typed or printed name of registered agent and title if applicable DATE

11. **FILE NOW!!! Due by May 1, 2005.**
See Block 11 instructions for fee info.

9. Capital Contributions as Shown on record. **\$3,000,000.00**

10. Amount of Capital Contributions in FLORIDA to date. **1,000,000.**

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 #	L00000008400
NAME	VOGEL PROPERTIES, L.L.C.
STREET ADDRESS	6210 BRANDON ST.
CITY-ST-ZIP	P ALM BEACH GARDENS FL 33418-1489
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	700055331647
CITY-ST-ZIP	05/25/05--01052--007 **526.25
STREET ADDRESS	
CITY-ST-ZIP	
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: *James A Vogel* **May 28, 2005**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE