


**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005**

**FILED
May 16, 2005 08:00 AM
Secretary of State**

| | | | | | |
|---|---------------------------------|---|--|--|-------------------------------|
| DOCUMENT # A01000000120 | | | |  | |
| 1. Entity Name DAVID MILLARD ENTERPRISES LIMITED PARTNERSHIP | | | | | |
| Principal Place of Business C/O ENGLEBERG & MILGRIM, P.L. 3230 STIRLING ROAD, #1 HOLLYWOOD, FL 33021 | | Mailing Address C/O ENGLEBERG & MILGRIM, P.L. 3230 STIRLING ROAD, #1 HOLLYWOOD, FL 33021 | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | 4. FEI Number 65-1070482 | |
| Zip | | Country | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent ENGELBERG, MORRIS ESQ. C/O ENGELBERG & MILGRIM, P.L. 3230 STIRLING ROAD, #1 HOLLYWOOD, FL 33021 | | | 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 <i>DK Millard</i> | | | | DATE 4/11/05 | |
| 9. Capital Contributions as Shown on record. \$100,000,000.00 | | 10. Amount of Capital Contributions in FLORIDA to date | | | |
| 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 # | P01000008418 | | STREET ADDRESS | U00000366851 | |
| NAME | DAVID MILLARD ENTERPRISES, INC. | | CITY-ST-ZIP | 05/15/05-80009-014 526.25 | |
| STREET ADDRESS | 3230 STIRLING ROAD, #1 | | | | |
| CITY-ST-ZIP | HOLLYWOOD, FL 33021 | | | | |
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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: <i>DK Millard</i> | | | DATE: 4/11/05 | | Daytime Phone #: 713-210-4368 |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER | | | Date | | Daytime Phone # |

STAPLE CHECK HERE

