2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED Feb 16, 2005 08:00 AM Secretary of State

| Phintipal Place of Brainings Address AVE 42S N. ANDRENS AVE 41 FORT LAUDERDALE, FL. 33301 2. Principal Place of Business Suite, Act. F. etc. Suite, Act. | 1. Entit | ty Nam | MENT # A0100000 LOFTS, LTD. | 0608 | | | Se | cretary | of State | |
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| ## FORT LAUDERDALE, FL 33301 2. Principal Piece of Business \$. Malling Address \$. Malling Address \$. Malling Address \$. Malling Address \$. Suite, Apt. #, etc. City & State City & Country City & | Principa | Principal Place of Business Mailing Address | | | | | | | | |
| FORT LAUDERDALE, FL 33301 2. Principal Place of Business Suite, Apr. 8, etc. Suite, A | | | | | | | | | | |
| Suite, Apt. 4, etc. Suite, Ap | | | | | | | | | | |
| City & State Country Experiment of Country E | 2. Princ | Principal Place of Business 3. Mailing Address | | | | | | | | |
| For Application Section Sectio | | Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | 01112005 Chg-LP | CR2E003 | (10/03) | |
| 6. Cettificated Status Desired Security Desired | * City | *City & State City & Sta | | | State | | | | Applied For Not Applicable | |
| HOOPER, ALAN C 425 N. ANDREWS AVENUE #1 FORT LAUDERDALE, FL. 33301 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Portia. I am familiar with, and accept the obligations of registered agent, or both, in the State of Portia. I am familiar with, and accept the obligations of registered agent, or both, in the State of Portia. I am familiar with, and accept the obligations of registered agent, or both, in the State of Portia. I am familiar with, and accept the obligations of registered agent, or both, in the State of Portia. I am familiar with, and accept the obligations of registered agent, or both, in the State of Portia. I am familiar with, and accept the obligations of registered agent, or both, in the State of Portia. I am familiar with, and accept the obligations of registered agent, or both, in the State of Portia. I am familiar with, and accept the obligations of registered agent, or both, in the State of Portia. I am familiar with, and accept the obligations of registered agent, or both, in the State of Portia. I am familiar with, and accept the obligations of registered agent, or both, in the State of Portia. I am familiar with, and accept the registered agent, or both, in the State of Portia. I am familiar with, and accept the registered agent, or both, in the State of Portia. I am familiar with, and accept the registered agent, or both, in the State of Portia. I am familiar with, and accept the registered agent, or both, in the State of Portia. I am familiar with, and accept the registered agent, or both, in the State of Portia. I am familiar with, and accept the registered agent, or both, in the State of Portia | √ Zip | | Country | Zip Country | | niry | 5. Certificate of Status Desired | | | |
| HOOPER, ALAN C 425 N. ANDREWS AVENUE #1 FORT LAUDERDALE, FL 33301 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 are of inspitant agent entitle 2 percent to obligations of registered agent are of inspitant agent entitle 2 percent to obligations of registered agent are of inspitant agent entitle 2 percent to obligations of registered agent. or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. or both, in the State of Florida. I am familiar with, and accept the control of the florida. I am familiar with, and accept the control of the florida. I am familiar with, and accept agent and accept the florida. I am familiar with, and accept the florida statutes and accept the florida statutes. I further certify the the information of the florida statutes. I further certify the the information of the florida statutes. I further certify the the information of the florida statutes of the florida pa | | 6. Name and Address of Current Registered Agent | | | | | 7. Name and Address of New I | legistered Age | nt | |
| FORT LAUDERDALE, FL 33301 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Fortida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fortida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fortida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fortida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fortida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fortida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fortida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fortida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fortida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fortida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Fortida. I am familiar with, and accept the top of the semiliar with, and accept the confidence of the state of Fortida. I am familiar with, and accept agent ag | | HOOPER, ALAN C | | | | | | | | |
| 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 Fortida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, types or prince from a displanted agent and the Tapphatable. 9. Capital Contributions as Shown on record. \$1,500,000.00 10. Amount of Capital Contributions as Shown on record. \$1,500,000.00 10. Amount of Capital Contributions as Shown on record. \$1,500,000.00 10. Amount of Capital Contributions in FLORIDA to date. A GENERAL PARTINER 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 filled to change a general partner. 12. GENERAL PARTINER INFORMATION 13. ADDRESS CHANGES ONLY DOCUMENT IN THE PORT LAUDERDARLE, FL 33301 CONTY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZP DOCUMENT IN THE TADRESS CHANGES ONLY STREET ADDRESS CHANGES ONL | #1 | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| 8. The above named entity submite this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature Paymen, speed or printed name of inglistered agent and site if applicable. DATE 10. Amount of Capital Contributions as Shown on record. A GENERAL PARTINER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an ammendment must be filled to change a general partner. 12. 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 ammendment must be filled to change a general partner. 13. ADDRESS CHANGES ONLY DOCUMENT AVENUE LOFTS DEVELOPMENT, LLC STREET ADDRESS CITY-ST-2P DOCUMENT AND ACTIVE WITH THIS OFFICE. OITY-ST-2P DOCUMENT ADDRESS CITY-ST-2P DOCUMENT AD | FORT | FORT LAUDERDALE, FL 33301 | | | | | | | | |
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