

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A01000001641

**FILED**  
**Mar 25, 2005**  
**Secretary of State**

**Entity Name:** GATOR CINCINNATI PARTNERS LLLP

**Current Principal Place of Business:**

1595 NE 163RD ST  
NORTH MIAMI BEACH, FL 33162

**New Principal Place of Business:**

**Current Mailing Address:**

1595 NE 163RD ST  
NORTH MIAMI BEACH, FL 33162

**New Mailing Address:**

FEI Number: 75-2995398

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOLDSMITH, JAMES A  
1595 NE 163RD ST  
NORTH MIAMI BEACH, FL 33162 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Capital Contributions as Shown on record:** 10,000.00

**Amount of Capital Contributions in Florida to date:** 10,000.00

**GENERAL PARTNER INFORMATION:**

Document #:

Name: GATOR CINCINNATI INVESTORS INC

Address: 1595 NE 163RD ST

City-St-Zip: NORTH MIAMI BEACH, FL 33162

**ADDRESS CHANGES ONLY:**

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 GOLDSMITH

PTNR

03/25/2005

\_\_\_\_\_ Electronic Signature of Signing General Partner

\_\_\_\_\_ Date