

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Jan 25, 2005 08:00 AM
Secretary of State

DOCUMENT # A02000001706 1. Entity Name GINGA GROUP, LLLP					
Principal Place of Business 1828 ROLAND STREET SARASOTA, FL 34231			Mailing Address 1828 ROLAND STREET SARASOTA, FL 34231		
2. Principal Place of Business Suite, Apt #, etc			3. Mailing Address Suite Apt # etc		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 38-3668799	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent GREGORIA, RIC 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236				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 _____ DATE _____ Signature, typed or printed name of registered agent and date if applicable					
9. Capital Contributions as Shown on record. \$250,000.00			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 #	P02000132998		STREET ADDRESS		
NAME	GINGA INC.		CITY-ST-ZIP		
STREET ADDRESS	1828 ROLAND STREET		STREET ADDRESS		
CITY-ST-ZIP	SARASOTA, FL 34231		CITY-ST-ZIP		
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NAME			CITY-ST-ZIP		
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STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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)(f), 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>Rita B Steele</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			1-20-05 1-941-922-5071 Date Daytime Phone #		

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