

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
May 11, 2005 08:00 AM
Secretary of State

DOCUMENT # A03000000671



1. Entity Name
 3RD AVENUE ASSOCIATES, L.L.P.

Principal Place of Business: 240 S. PINEAPPLE AVENUE, 10TH FLOOR, SARASOTA, FL 34236
 Mailing Address: 240 S. PINEAPPLE AVENUE, 10TH FLOOR, SARASOTA, FL 34236



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

02232005 Chg-LP CR2E003 (10/03)

4. FEI Number: 45-0513657
 Applied For: Not Applicable

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

6. Name and Address of Current Registered Agent: BAND, DAVID, 240 S. PINEAPPLE AVENUE, 10TH FLOOR, 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 file if applicable.

9. Capital Contributions as Shown on record: \$2,000,000.00
 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 #	BAND, DAVID S	STREET ADDRESS	
NAME	240 S. PINEAPPLE AVENUE, 10TH FLOOR	CITY-ST-ZIP	
STREET ADDRESS	SARASOTA, FL 34236		
CITY-ST-ZIP			
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STAPLE CHECK HERE

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: David S. Band David S. Band, Gen. Ptr. 3/25/05 941/366-6660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #