


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED

2005 MAY -3 P 12:49

SECRETARY OF STATE
 FLORIDA



DOCUMENT # A03000001741							
1. Entity Name AKU TIKI, LTD.							
Principal Place of Business 2225 S. ATLANTIC AVENUE DAYTONA BEACH SHORES, FL 32118		Mailing Address 2225 S. ATLANTIC AVENUE DAYTONA BEACH SHORES, FL 32118					
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country	04092005	Chg-LP CR2E003 (10/03)		
4. FEI Number 20-0490578				Applied For Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
BURNETT, RANDOM R 501 N. GRANDVIEW AVENUE, 3RD FLOOR EAST DAYTONA BEACH, FL 32118			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>							
9. Capital Contributions as Shown on record. \$1,750.00		10. Amount of Capital Contributions in FLORIDA to date. 1,986,784.82					
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 #	L03000052549		STREET ADDRESS				
NAME	AKU TIKI, LLC		CITY-ST-ZIP	600053821186			
STREET ADDRESS	2225 S. ATLANTIC AVENUE			05/04/05--01021--017 **526.25			
CITY-ST-ZIP	DAYTONA BEACH SHORES, FL 32118						
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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)(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		 THOMAS W STAED FOR AKU TIKI, LLC 4/25/05		386 257-0251			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER				Daytime Phone #			

STAPLE CHECK HERE