


**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005**

**FILED
Feb 28, 2005 08:00 AM
Secretary of State**

DOCUMENT # A09962		
1. Entity Name BELLEVUE ASSOCIATES, LTD.		

Principal Place of Business 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756	Mailing Address 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.	City & State	Suite, Apt. #, etc.	City & State
Zip	Country	Zip	Country

01272005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-2054280	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
FLYNN, THOMAS F 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756		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 title if applicable

9. Capital Contributions as Shown on records \$234,600.00	10. Amount of Capital Contributions in FLORIDA to date.
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**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 # NAME STREET ADDRESS CITY - ST - ZIP	L03000016920 OAKBROOK, LLC 516 LAKEVIEW ROAD, UNIT 8 CLEARWATER, FL 33756	STREET ADDRESS	1000000349811 02/28/05-200481-005 535.00
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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)(c), 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:  **Kevin T. Flynn** As Vice-President of **LLC General Partner** 2/16/05 727-449-1182
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Dating Phone #