2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED

DOCU	MENT # A22964	nay 1, 2005	 ,					of State
1. Entity Nami		#				50	er ettir y	or state
C/O TAX DEP 500 ARCH ST		Mailing Address C/O TAX DEPT. 500 ARCH ST WILLIAMSPORT, PA 17	705		· <u>-</u>			d wilki Ribitati Bi 1887
2. Principal Pi	ace of Business	3. Mailing Address						
Surte, Apt #, etc.		Suite, Apt #, etc.		01132005	Chg-LP	CR2E003 ((10/03)	
City & State		City & State		4. FEI Number 52-1448			Applied For Not Applicable	
Zip	Country	Zip	Country			of Status Desired		75 Additional Required
	6. Name and Address of Current F	Registered Agent		Name	7. Name and A	Address of New	Registered Ager	nt
1201 HAYS	HALL CORPORATION SYSTI	EM_			P O Box Number	r is Not Acceptab	le)	
STE 105 TALLAHAS	SSEE, FL 32301		***	City				Zip Code
	named entity submits this statement for	the purpose of changing its	register		ed agent, or both	, in the State of F		·
the obligati	ions of registered agent							
	Signature, typed or printed name of registered agent at	d late it approable 10. Amount of Capita	al Contril	outions			DATE	
9. Capital Coi as Shown o		in FLORIDA to d		- SINULIS				
	A GENERAL PARTNER TO NOTE: General Partners MA							r.
12.	GENERAL PARTNER	INFORMATION	13.			ADDRESS CH	IANGES ONLY	
DOCUMENT # NAME STREET ADDRESS	P10794 TURA HOLDINGS, INC.		STRE	ET ADDRESS				
CITY+ST-ZIP	500 ARCH STREET WILLIAMSPORT, PA 17705	· -	CITY	-ST-2IP				
DOCUMENT # NAME STREET ADDRESS	P31655 OPCO, INC. 500 ARCH STREET		STPE	FT ADDRESS		U0000C	1 295016 -80011-009	
- CITY ST-ZIF	WILLIAMSPORT, PA 17705		CITY	ST 2IP		04/09/05-	-80011-009 	5 141.25
POCUVENT # NAME STREET ADDRESS			STRE	ET ADDRESS		<u> </u>		
CITY 3T-ZIP		Marine Ma	ÇITY	- \$1-4P				
HAME STREET ADDRESS			STRE	ET ADDRESS				
E CITY-ST-ZIP		1	CITY	-ST-2IP				
DOCUMENT # NAME STREET ADDRESS			STRE	ET ADORESS				
LI CITY-ST-ZIP			CITY	-ST-ZIP				
DOCUMENT # NAME STREET ADDRESS			ŞIRE	ET ADOPESS				
CITY-ST-ZIP	certify that the information supplied with	this filing does not quartita		ST ZIP	etion 110 Theorem	Florida Stat. too	I further again, a	hat the information
indicatéd	certify that the information supplied with on this report is true and accurate and the er or trustee ampowered to execute this	hat my signature shall have	the same	e legal effect as if n Florida Statutes	nade under eath.	that I am a Gener	ral Partner of the	imited partnership or
SIGNAT	URE: SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING GENER	AL PARTNE		Uzapi	15 / Jec/	Itreas Degano	e Fhone #