

STAPLE CHECK HERE

2005 LIMITED PARTNERSHIP ANNUAL REPORT

FILED

DOCUMENT # A27809 1. Entity Name FFLP, LTD.						6, 2005 08:00 Aleretary of State
Principal Place of Business Mailing Address P. O. BOX 2973 P. O. BOX 2973 PALM BEACH, FL 33480 PALM BEACH, FL 33480				· · · · · · · · · · · · · · · · · · ·		
Principal Place of Business 3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		04252005 Chg-LP	CR2E003 (10/03)
City & State		City & State	City & State		4. FEI Number 65-0179685	Applied For Not Applicable
Zip	Country Zip		Country	y	5. Certificate of Status Desired	Fee Hequired
6. Name and Address of Current Registered Agent				Name	7. Name and Address of Nev	v Registered Agent
HERON, J E = 232 AUSTRALIAN AVE. PALM BEACH, FL 33480				Street Address (P.O. Box Number is Not Acceptable)		
1				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 the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable. DATE						
9. Capital Co as Shown	on record. \$100,000.00	10. Amount of Car in FLORIDA to	date. 45	ove		
					ERED AND ACTIVE WITH t must be filed to change a	
12. GENERAL PARTNER INFORMATION UULUMENI : K45946					ADDRESS C	HANGES ONLY
NAME STREET ADDRESS	NAME FLP INVESTMENT CORP. 232 AUSTRALIAN AVE., STE. 2			ADDRESS T-ZIP		
DOCUMENT #	1712117 522 1011,7 2 00 100		STREET	ADDRESS	000 05/16/	000367223 05-80026-018 141, 25
STREET ADDRESS CITY - ST - ZIP			CITY+S	T-ZIP		- 11 11 12 12 12 12 12 12 12 12 12 12 12
DOCUMENT# NAME			STREET	ADCRESS		
STREET ADDRESS CITY-ST-ZIP	P		CITY-ST	T-ZIP		
NAME STREET ADDRESS			STREET	ADDRESS		· . · · · · · · · · · · · · · · · · · ·
CITY-ST-ZIP		- 	CiTY-SI	T-ZIP		
NAME STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			CITY-ST)-4IP		
NAME STREET ADDRESS CITY-ST-ZIP			STREET CITY-ST	ADDRESS T-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 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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.						W. Miner
SIGNAT	URE: SIGNATURE AND WOR	CONTROLLS: CAN YEED OR PRINTED NAME OF SIGNING GENERAL PARTNER			4-28-C5	5761 - 659 - 306 U
Jem & Heror A May, dens						