2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

Due By Maý 1, 2005											
DOCU 1. Entity Nam CSC PAL	ne	# A93000001 GE, LTD.	309			2005 A	FILED PR 27 PM	կ։ 50	,		
3801 PGA B	RAMER & AS LVD SUITE 5	SSOCIATES, P.A.	Mailing Address C/O DARYL CRAMER & ASSOCIATES, P.A. 3801 PGA BLVD SUITE 508 PALM BEACH GARDENS, FL 33410-2758				N OF CORPO AHASSEE, I				
2. Principal P C/O Harr	is Crame	r II. P	3. Mailing Address C/o Harris Cramer IIP 1555 Palm Beach Lakes Blvd.								
		Lakes Blvd., Ste.					03112005	Chg-LP	CR2E003	(10/03)	
City & State West Palm Beach , FL			City & State West Palm Beach, FL				4. FEI Number 11-3192	122	,	Applied For Not Applicable	
33401		Country USA 33401		Cour	try USA	5. Certificate of Status Desired				.75 Additional Required	
	6. Name	and Address of Current	Registered Agent					ddress of New R	egistered Age	nt	
DARYL CF		Harris									
3801 PGA PALM BEA			Street Address (P.O. Box Number is Not Acceptable) 1555 Palm Beach Lakes Blvd.								
					Suite				FL Zip Code		
9 The chaus		West Palm Beach				(33401				
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. Harris Cramer IIP by Daryl Cramer & Associates, P.A., Pairther											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.											
9. Capital Contributions as Shown on record. \$330,000.00 10. Amount of Capital Contributions in FLORIDA to date. \$330,000.00											
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.	13.				ADDRESS CHA						
DOCUMENT # NAME STREET ADDRESS	P9800008 PARADIS 3801 PGA		STREET ADDRESS 1555 Palm Beach Lakes Blvd., Suite 310								
CITY-ST-ZIP	PALM BE	ACH GARDENS, FL 33	4102758	CITY	-SI-ZIP	west	Palm Beach	, FL 33401	•		
DOCUMENT # NAME	Ì			STRE	ET ADDRESS						
STREET ADDRESS CITY-ST-ZIP				CITY	-ST-ZIP						
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STRÆT ADDRESS City-St-Zip	:			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 Paradisse Cay General Partner, INC.											
SIGNATURE:											