


**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2005**

FILED
Feb 22, 2005 08:00 AM
Secretary of State

DOCUMENT # A94000000938	
1. Entity Name MBC CORE PROPERTIES LIMITED PARTNERSHIP	

Principal Place of Business 7660 MANASOTA KEY ROAD ENGLEWOOD FL 34223	Mailing Address 7660 MANASOTA KEY ROAD ENGLEWOOD FL 34223
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1ST MOORE CR2E003 (10/04)

4. FEI Number 65-0548118		<input type="checkbox"/> 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 MANASOTA BEACH CLUB, INC. 7660 MANASOTA KEY ROAD ENGLEWOOD FL 34223		7. Name and Address of New Registered Agent 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 _____ Signature, typed or printed name of registered agent and title if applicable **DATE** _____

9. Capital Contributions as Shown on record. \$1,200,000.00 **10. Amount of Capital Contributions in FLORIDA to date.**

11. FILE NOW!!! Due by May 1, 2005.
See Block 11 instructions for fee info.

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 # 401310	NAME MANASOTA BEACH CLUB, INC.	STREET ADDRESS	
STREET ADDRESS 7660 MANASOTA KEY ROAD		CITY- ST- ZIP	
CITY- ST- ZIP ENGLEWOOD FL 34223		STREET ADDRESS	
DOCUMENT #		CITY- ST- ZIP	
NAME		STREET ADDRESS	
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NAME		STREET ADDRESS	
STREET ADDRESS		CITY- ST- ZIP	
CITY- ST- ZIP		STREET ADDRESS	

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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)(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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: Robert C. Buehman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/15/05

Date

Daytime Phone #

941-476-2614