


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

FILED
Mar 18, 2005 08:00 AM
Secretary of State

DOCUMENT # A96000001793 1. Entity Name KEISER COMMONS ASSOCIATES, LTD.	
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Principal Place of Business 226 N. DUVAL TALLAHASSEE FL 32301	Mailing Address P.O. BOX 13633 TALLAHASSEE FL 32317
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2. Principal Place of Business Suite, Apt #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	Country	Country
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1ST MOORE CR2E003 (10/04)

6. Name and Address of Current Registered Agent RUDNICK, JAMES M 226 N. DUVAL TALLAHASSEE FL 32301		7. Name and Address of New Registered Agent Name Street Address (P. O. Box Number is Not Acceptable) City FL Zip Code	
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4. FEI Number 59-3417806	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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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

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

9. Capital Contributions as Shown on record. \$98,000.00	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	
DOCUMENT #	P96000078910
NAME	RUDNICK COMMONS CORPORATION
STREET ADDRESS	410 OFFICE PLAZA
CITY-ST-ZIP	TALLAHASSEE FL 32317
DOCUMENT #	P96000078903
NAME	KEISER COMMONS CORP.
STREET ADDRESS	1600 N.W. 49TH STREET
CITY-ST-ZIP	FT. LAUDERDALE FL 33309
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	000000267498
CITY-ST-ZIP	03/18/05-80002-009 526.25
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
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

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/8/05 850-671-1999
Date Daytime Phone #

STAPLE CHECK HERE