

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR -4 AM 9:44

DOCUMENT # A97000002709 1. Entity Name HS LAND HOLDINGS, LTD.					
Principal Place of Business % W. KELLY SMITH 405 MELANIE WAY MAITLAND, FL 32751			Mailing Address % W. KELLY SMITH 405 MELANIE WAY MAITLAND, FL 32751		
2. Principal Place of Business 255 S. Orange Avenue		3. Mailing Address P.O. Box 2254			
Suite, Apt. #, etc. Suite 800		Suite, Apt. #, etc.			
City & State Orlando, FL		City & State Orlando, FL			
Zip 32801		Country USA		01142005 Chg-LP CR2E003 (10/03)	
4. FEI Number 59-3499653		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 SMITH, KEVIN K 255 S. ORANGE AVENUE, SUITE 800 ORLANDO, FL 32801		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>			
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$3,969,428.00		10. Amount of Capital Contributions in FLORIDA to date. 3,900,000			
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 #	P97000063660		STREET ADDRESS	<div style="border: 1px solid black; padding: 5px;"> 600048122716 03/10/05--01011--004 **\$26.25 </div>	
NAME	HORSH, INC.		CITY-ST-ZIP		
STREET ADDRESS	255 S. ORANGE AVENUE, SUITE 800		CITY-ST-ZIP		
CITY-ST-ZIP	ORLANDO, FL 32801		CITY-ST-ZIP		
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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

HORSH, INC.

SIGNATURE: By: W. Kelly Smith W. Kelly Smith, Secretary 1/14/05 407-843-7300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE