


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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 MAY 26 AM 9:06

<b>DOCUMENT # A99000000510</b> 1. Entity Name DAVIS PARTNERSHIP, LTD.	
---	---

Principal Place of Business 5380 NORTH OCEAN DRIVE, APT. 15-H SINGER ISLAND FL 33404	Mailing Address 4400 PGA BLVD., STE. 102 PALM BEACH GARDENS FL 33410
--	--

2. Principal Place of Business 4400 PGA Blvd., Ste. 102 Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
---	---



1ST MOORE CR2E003 (10/04)

City & State Palm Beach Gardens, FL	City & State	4. FEI Number 65-0910890	Applied For Not Applicable
Zip 33410	Country	Zip	Country

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
---	---------------------------------------

<b>6. Name and Address of Current Registered Agent</b>  SILVERMAN, THOMAS N ESQ. 4400 PGA BLVD., STE. 102 PALM BEACH GARDENS FL 33410
---

<b>7. Name and Address of New Registered Agent</b> 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 \_\_\_\_\_ 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. <b>\$3,000,000.00</b>	10. Amount of Capital Contributions in FLORIDA to date.
--	---

**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 # NAME STREET ADDRESS CITY-ST-ZIP	KLEINMAN, SHERRY D 17239 AVENUE DE LA HERRADURA PACIFIC PALISADES CA 90272
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	DAVIS, SUSAN A 110 GREENE STREET, APT. 10-D NEW YORK NY 10012
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	900056300009 06/17/05--01029--018 **88.75
STREET ADDRESS CITY-ST-ZIP	900056300009 06/17/05--01029--019 **437.50
STREET ADDRESS CITY-ST-ZIP	
STREET ADDRESS CITY-ST-ZIP	
STREET ADDRESS CITY-ST-ZIP	

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

SIGNATURE: Sherry Davis Kleinman 4-9-2005  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #