


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # A99000001312					
1. Entity Name TOMATO INVESTMENTS, LTD.					
Principal Place of Business 1655 27TH ST., STE. 2 VERO BEACH, FL 32960		Mailing Address 2614 CARDINAL DRIVE VERO BEACH, FL 32963			
2. Principal Place of Business <i>111 ORANGE AVENUE</i>		3. Mailing Address			
Suite, Apt. #, etc. <i>Suite 302</i>		Suite, Apt. #, etc.			
City & State <i>FORT PIERCE, FL</i>		City & State			
Zip <i>34950</i>		Country		Country	
6. Name and Address of Current Registered Agent WILLIAMS, ANDREW W 1655 27TH ST., STE. 2 VERO BEACH, FL 32960		7. Name and Address of New Registered Agent Name <i>ANDREW W. WILLIAMS</i> Street Address (P.O. Box Number is Not Acceptable) <i>111 ORANGE AVENUE</i> <i>Suite 302</i> City <i>FORT PIERCE</i> FL Zip Code <i>34950</i>			
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: <i>Andrew W. Williams</i> <i>Andrew W. Williams</i> <i>3/10/05</i> <small>Signature, typed or printed name of registered agent and title if applicable</small> <small>DATE</small>					
9. Capital Contributions as Shown on record. \$18,000,000.00		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			13. ADDRESS CHANGES ONLY		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P99000063405 CHIEF INVESTMENTS FLORIDA, INC. 1655 27TH ST., STE. 2 VERO BEACH, FL 32960		STREET ADDRESS	<i>111 ORANGE AVENUE Suite 302</i>	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	<i>FORT PIERCE, FL 34950</i>	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS	<i>200048845832</i>	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	<i>03/22/05--01021--012 **526.25</i>	
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DOCUMENT # NAME STREET 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)(f), 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: <i>Andrew W. Williams</i> <i>Andrew W. Williams</i> <i>3/10/05</i>		<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>		<i>772-467-1151</i> <small>Daytime Phone #</small>	

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