

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

DOCUMENT # B04000000090

1. Entity Name
TREESOURCE, LLLP, OF GEORGIA, LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JAN 18 AM 9:54

Principal Place of Business
P.O. BOX 80017
INDIANAPOLIS, IN 46280

Mailing Address
P.O. BOX 80017
INDIANAPOLIS, IN 46280

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052005 Chg-LP CR2E003 (10/03)

4. FEI Number

35-2015361

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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. \$3,430,000.00

10. Amount of Capital Contributions
in FLORIDA to date. \$3,000,000

\$835.00

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 HACKL, A.J.
STREET ADDRESS PO BOX 832
CITY-ST-ZIP LAKE WALES, FL 33859

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME HACKL, CHRISTINE M
STREET ADDRESS PO BOX 832
CITY-ST-ZIP LAKE WALES, FL 33859

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME WALSH, CHRISTINE
STREET ADDRESS 10629 WALNUT CREEK DRIVE
CITY-ST-ZIP CARMEL, IN 46032

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME WALSH, MICHAEL STEVEN
STREET ADDRESS 10629 WALNUT CREEK DRIVE
CITY-ST-ZIP CARMEL, IN 46032

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME HACKL, ALBERT JAMES JR
STREET ADDRESS 5278 JEFFERSON ROUNDABOUT
CITY-ST-ZIP CARMEL, IN 46033

STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME HACKL, MARGUERITE
STREET ADDRESS 5278 JEFFERSON ROUNDABOUT
CITY-ST-ZIP CARMEL, IN 46033

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: *Albert James Hackl, Jr.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

700045615397
01/31/05--01005--003 **535.00

1/5/05
Date

317 571 2356
Daytime Phone #

STAPLE CHECK HERE