



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

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # A99000000391					
1. Entity Name COMMERCE WAY, LTD.					
Principal Place of Business 2300-2320 S. AIRPORT BLVD. SANFORD FL 32771		Mailing Address P.O. BOX 840877 MAITLAND FL 32794-0877			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3603108	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent TATICH, PHILIP 341 NORTH MAITLAND AVENUE, SUITE 340 MAITLAND FL 32751				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>				DATE _____	
9. Capital Contributions as Shown on record \$288,000.00		10. Amount of Capital Contributions in FLORIDA to date.			
11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.					
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 #	L28451			STREET ADDRESS	
NAME	SDP INVESTMENTS, INC.			CITY - ST - ZIP	
STREET ADDRESS	1605 KING ARTHUR CIRCLE				
CITY - ST - ZIP	MAITLAND FL 32751				
DOCUMENT #	L79712			STREET ADDRESS	
NAME	SOS REALTY CORP.			CITY - ST - ZIP	
STREET ADDRESS	1605 KING ARTHUR CIRCLE				
CITY - ST - ZIP	MAITLAND FL 32751				
DOCUMENT #				STREET ADDRESS	
NAME	RED BAY PARTNERS, INC.			CITY - ST - ZIP	
STREET ADDRESS	117 RED BAY DRIVE				
CITY - ST - ZIP	LONGWOOD FL 32779				
DOCUMENT #				STREET ADDRESS	
NAME				CITY - ST - ZIP	
STREET ADDRESS					
CITY - ST - ZIP					
DOCUMENT #				STREET ADDRESS	
NAME				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: 				DATE: 4/13/05 (407) 202-3131	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER					

STAPLE CHECK HERE