2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED

DOCUMENT # A0000000899 1. Entity Name TOMLINSON FAMILY LIMITED PARTNERSHIP					Secretary of State	
Principal Place of Business 3700 LEAFY WAY MIAMI, FL 33133		Mailing Address 3700 LEAFY WAY MIAMI, FL 33133				
2. Principal Pl	ace of Business	3. Mailing Address	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State			4. FEI Number	CR2E003 (10/03) Applied For
Zip Country		Zip Country		ntry	65-1064288 5. Certificate of Status Desired	Not Applical \$8.75 Additional
	8. Name and Address of Cur	rent Dogistared Agent		1	ļ <u></u>	Fee Required
6. Name and Address of Current Registered Agent CORPCO, INC. 2699 S. BAYSHORE DRIVE, 7TH FL MIAMI, FL 33133			<u> </u>	7. Name and Address of New Registered Agent Name		
				Street Address (P.O. Box Number is Not Acceptable)		
				Cíty		Zip Code
8. The above named entity submits this statement for the purpose of changing its r			- L	<u> </u>		;
9. Capital Cor as Shown o	an record. \$1,980,000.00	10. Amount of C in FLORIDA	lo date.		TERED AND ACTIVE WITH TH	DATE
ı					nt must be filed to change a g	
12.	GENERAL PAR	TNER INFORMATION	13.		ADDRESS CHA	ANGES ONLY
DOCUMENT # NAME STREET ADDRESS	TOMLINSON, MALCOLM J 3700 LEAFY WAY		STR	EET ADDRESS		
CITY-ST-ZIP	COCONUT GROVE, FL 331	33	CATA	(-ST-ZIP	(District	
NAME STREET ADDRESS			ı	EET ADDRESS	01/26/05	0196701 -80081-008_526.25
CITY-ST-ZIP DOCUMENT#				Y-ST-ZIP		<u></u>
name Street address				Y-ST-ZIP		
CITY-ST-ZIP DOCUMENT#				LEET ADORESS		
NAME STREET ADDRESS CITY-ST-ZIP				Y-ST-ZIP		
DOCUMENT#			STR	REET ADDRESS		
STREET ADDRESS			CIT	Y-ST-ZIP		
VCITY-ST-ZIP				į		
		*	STF	REET ADDRESS		