


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JUN 16 AM 9:30

DOCUMENT # A00000000934					
1. Entity Name DAVIS INVESTMENTS COMPANY, LTD.					
Principal Place of Business 295 MARSH LAKES DRIVE FERNANDINA BEACH, FL 32034 XXXXXXXXXXXX 246 OSPREY CIRCLE ST MARYS, GA 31558			Mailing Address 295 MARSH LAKES DRIVE FERNANDINA BEACH, FL 32034 XXXXXXXXXXXX 246 OSPREY CIRCLE ST MARYS, GA 31558		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
6. Name and Address of Current Registered Agent DAVIS, WILLIAM H 295 MARSH LAKES DRIVE FERNANDINA BEACH, FL 32034			7. Name and Address of New Registered Agent Name MICHAEL L. DAVIS 246 OSPREY CIRCLE 295 MARSH LAKES DR ST MARYS, GA 31558 FERNANDINA BEACH, City FERNANDINA BEACH, FL Zip Code 32034		
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 <u>Michael L. Davis</u> Michael L. Davis 6/13/05 Signature, typed or printed name of registered agent and title if applicable. DATE					
9. Capital Contributions as Shown on record. \$10,000,000.00		10. Amount of Capital Contributions in FLORIDA to date. 4,369,546.00		04/25/05	
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 #	P00000055466		STREET ADDRESS	246 OSPREY CIRCLE	
NAME	DAVIS INVESTMENTS COMPANY, INC.		CITY-ST-ZIP	ST MARYS, GA 31558	
STREET ADDRESS	295 MARSH LAKES DRIVE				
CITY-ST-ZIP	FERNANDINA BEACH, FL 32034				
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS	300056615508	
NAME			CITY-ST-ZIP	06/28/05-01038-011 **526.25	
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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: <u>Michael L. Davis</u> Michael L. Davis 4/28/05 912 510-8154 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #					

STAPLE CHECK HERE