2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED Apr 09, 2005 08:00 AM Secretary of State

DOCUMENT # A0000000945 1. Entity Name MCCALL'S BEACH CASTLE BAYSIDE, LTD.					Se	cretary of State
Principal Place of Business Mailing Address 5310 GULF OF MEXICO DRIVE 5310 GULF OF MEXIC LONGBOAT KEY, FL 34228 LONGBOAT KEY, FL 3						
Principal Place of Business				<u></u>		
Suite, Apt. #, etc.		Suite, Apr. #, etc		03232005 Chg-LP	CR2E003 (10/03)	
City & State		City & State	City & State		4. FEI Number 65-1023649	Applied For Not Applicable
Zip	Country	Zip	Cour	ntry	5. Certilicate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				I	7. Name and Address of New !	Registered Agent
GREGORIA, RIC				Name		
200 SOUT				Street Address (P.O. Box Number is Not Acceptable)		
				City		FL Zip Code
8. The above	named entity submits this statement for	r the purpose of changing it	s register	'	ed agent, or both, in the State of Fi	1 L.
the obligat	dons of registered agent.				and the second second	''
SIGNATURE	Signalize, typed or printers name of registered agent	and the it applicable.				DATE
9. Capital Co as Shown	on record. \$1,400,000.00	10. Amount of Capi in FLORIDA to o	date.			
	A GENERAL PARTNER T NOTE: General Partners MA	HAT IS A BUSINESS EI Y NOT be changed on t	NTITY M the form	IUST BE REGIST n; an amendmen	ERED AND ACTIVE WITH THE timust be filed to change a g	eneral partner.
12.	GENERAL PARTNER	R INFORMATION	13.		ADDRESS CH	ANGES ONLY
Document # Name	P00000056093 MCCALL'S BEACH CASTLE BAYSIDE CORP.			EFT ADORESS		
STREET ADDRESS CITY-ST-ZIP	5 5310 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228		CITY	- ST-ZIP		,
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14. Thereby certify that the information supplied with this filling 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 eath, 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: SUBJECT OF PROTECT NAME OF SIGNING CENERAL PARTNER DAY						

Jean M. McCall

STAPLE CHECK HERE