

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Feb 02, 2005 08:00 AM
Secretary of State

DOCUMENT # A00000001066					
1. Entity Name THE BERGER FAMILY LIMITED PARTNERSHIP #1					
Principal Place of Business 100 WEST CYPRESS CREEK RD, STE 700 FORT LAUDERDALE, FL 33309			Mailing Address 100 WEST CYPRESS CREEK RD, STE 700 FORT LAUDERDALE, FL 33309		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01182005 Chg-LP CR2E003 (10/03)	
City & State		City & State		4. FEI Number 65-1020956	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BERGER, WILLIAM 100 WEST CYPRESS CREEK RD, STE 700 FORT LAUDERDALE, FL 33309			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions, as Shown on record. \$890,900.00		10. Amount of Capital Contributions in FLORIDA to date. \$890,900.00			
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 STREET ADDRESS CITY - ST - ZIP	BERGER, WILLIAM 100 WEST CYPRESS CREEK RD, STE 700 FORT LAUDERDALE, FL		STREET ADDRESS 100 WEST CYPRESS CREEK RD, STE 700 FORT LAUDERDALE, FL	02/02/05-80035-016 526.25	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <i>William Berger</i>			1/19/05 954-343-6945		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date Daytime Phone #</small>		

STAPLE CHECK HERE