

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
May 05, 2005 08:00 AM
Secretary of State

DOCUMENT # A00000001107 1. Entity Name LYONS CORPORATE PARK, LLLP					
Principal Place of Business 4100 NORTH POWERLINE ROAD, SUITE B-2 POMPANO BEACH, FL 33073			Mailing Address 4100 NORTH POWERLINE ROAD, SUITE B-2 POMPANO BEACH, FL 33073		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		02072005 Chg-LP CR2E003 (10/03)	
4. FEI Number 65-0403329				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LASSER, LEE S 4100 NORTH POWERLINE ROAD, SUITE B-2 POMPANO BEACH, FL 33073				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 _____ Signature, typed or printed name of registered agent and title if applicable					
9. Capital Contributions as Shown on record. \$2,010,000.00			10. Amount of Capital Contributions in FLORIDA to date.		
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		
STREET ADDRESS	4100 NORTH POWERLINE ROAD, SUITE B-2		CITY-ST-ZIP		
CITY-ST-ZIP	POMPANO BEACH, FL 33073		CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS	FERRERA, MICHELE TRUSTEE		CITY-ST-ZIP		
CITY-ST-ZIP	6601 LYONS ROAD, C-1		CITY-ST-ZIP		
CITY-ST-ZIP	COCONUT CREEK, FL 33073		CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS	FERRERA, MICHAEL J TRUSTEE		CITY-ST-ZIP		
CITY-ST-ZIP	6601 LYONS ROAD, C-1		CITY-ST-ZIP		
CITY-ST-ZIP	COCONUT CREEK, FL 33073		CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
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CITY-ST-ZIP			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)(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>Augustine Ferrera, Partner</i>			Date 4/21/05 Daytime Phone #		



02072005 Chg-LP CR2E003 (10/03)

4. FEI Number **65-0403329** Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LASSER, LEE S
 4100 NORTH POWERLINE ROAD, SUITE B-2
 POMPANO BEACH, FL 33073**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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Signature, typed or printed name of registered agent and title if applicable

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13. ADDRESS CHANGES ONLY

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 CITY-ST-ZIP

**LASSER, LEE S TRUSTEE
 4100 NORTH POWERLINE ROAD, SUITE B-2
 POMPANO BEACH, FL 33073**

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
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 STREET ADDRESS
 CITY-ST-ZIP

**829927
 FERRERA, MICHELE TRUSTEE
 6601 LYONS ROAD, C-1
 COCONUT CREEK, FL 33073**

STREET ADDRESS

CITY-ST-ZIP

**U00000361493
 05/05/05 00075 014 526.25**

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE