


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 05 FEB 24 AM 10:50

DOCUMENT # A0000001823				
1. Entity Name CYNTHIA STRICKLAND FAMILY LIMITED PARTNERSHIP				
Principal Place of Business 7737 FERNBROOK WAY WINTER PARK, FL 32792		Mailing Address 7737 FERNBROOK WAY WINTER PARK, FL 32792		
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent		
STRICKLAND, CYNTHIA S 7737 FERNBROOK WAY WINTER PARK, FL 32792		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 <i>Cynthia S. Strickland</i>		CYNTHIA S. STRICKLAND		2/19/05
Signature, typed or printed name of registered agent and title if applicable.		DATE		
9. Capital Contributions as Shown on record. \$20,000.00		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 #	STRICKLAND, CYNTHIA S 7737 FERNBROOK WAY WINTER PARK, FL 32792	STREET ADDRESS		
NAME		CITY-ST-ZIP		
STREET ADDRESS				
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STREET ADDRESS				
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: <i>Cynthia Strickland</i>		CYNTHIA STRICKLAND		2/19/05 407-672-1768
Signature and typed or printed name of signing general partner		Date		Daytime Phone #

STAPLE CHECK HERE

gls



02192005 Chg-LP CR2E003 (10/03)

4. FEI Number
NOT APPLICABLE Applied For
 Not Applicable

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

400047976724
 03/09/05--01003--001 **228.75