


**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2005**

<b>DOCUMENT # A00000002056</b>				
1. Entity Name <b>QUENTIN A. PEARSON AND JEAN H. PEARSON FAMILY PARTNERSHIP, LIMITED</b>				
Principal Place of Business <b>766 RIVERSIDE DRIVE ORMOND BEACH FL 32176</b>		Mailing Address <b>766 RIVERSIDE DRIVE ORMOND BEACH FL 32176</b>		
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State		City & State		
Zip	Country	Zip	Country	

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 MAR 31 AM 9:05



1ST MOORE CR2E003 (10/04)

4. FEI Number <b>59-3692530</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	

6. Name and Address of Current Registered Agent  <b>PEARSON, QUENTIN A 766 RIVERSIDE DRIVE ORMOND BEACH FL 32176</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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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

**11: FILE NOW!!! Due by May 1, 2005**  
See Block 11 instructions for fee info.

9. Capital Contributions as Shown on record. **\$700,000.00**

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 #	PEARSON, QUENTIN A	STREET ADDRESS	<b>300050093423</b> <b>04/07/05 01009 014 **526.25</b>
NAME	766 RIVERSIDE DRIVE	CITY-ST-ZIP	
STREET ADDRESS	ORMOND BEACH FL 32176	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
DOCUMENT #	PEARSON, JEAN H	STREET ADDRESS	
NAME	766 RIVERSIDE DRIVE	CITY-ST-ZIP	
STREET ADDRESS	ORMOND BEACH FL 32176	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
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)(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:** *Quentin A Pearson* *JP Pearson* **03-28-05 (386) 673 5666**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE