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

## FILED SECRETARY OF STATE DIVISION OF CORPORATIONS DOCUMENT # A00465 1 Entity Name WINTER PARK PINES, LTD. 05 FEB 17 AM 9: 14 Principal Place of Business Mailing Address 400 N. PRIMROSE DR. ORLANDO FL 32803 400 N. PRIMROSE DR. ORLANDO FL 32803 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E003 (10/04) Applied For City & State City & State 4. FEI Number 59-6142887 Not Applicable Country "Ziō Country Zin \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BERZIN, ROBERT Street Address (P.O. Box Number is Not Acceptable) 400 NORTH PRIMROSE DRIVE ORLANDO FL 32803 Zip Code City 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. 11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info. 9. Capital Contributions 10. Amount of Capital Contributions \$10,000.00 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. ADDRESS CHANGES ONLY 12. GENERAL PARTNER INFORMATION DOCUMENT # P99000012909 STREET ADDRESS DONALD L. BERG ASSOCIATES, INC. STREET ADDRESS 400 N. PRIMROSE DR. CITY-ST-7IP CITY-ST-ZIP ORLANDO FL 32803 680451 DOCUMENT # STREET ADDRESS INDUSTRIAL CONSTRUCTION CORP. NAME STREET ADDRESS 400 N. PRIMROSE DR CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL DOCUMENT # STREET ADDRESS. NAME STREET ADDRESS CITY-ST-7IP CITY-STEZIE DOCUMENT # STREET ADDRESS NAME STREET ADDRESS 000047478950 03/01/05--01013--016 \*\*150.00 CITY-ST-7IP CITY-ST-ZIP DOCUMENT # 000047478950 STREET ADDRESS NAME. <del>03/01/05 --01013---017</del> STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 14. I hereby 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 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.

CORP OFFERAL PRINTER

ATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTITY

SIGNATURE ROBERT BERZILD