2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

Due By May 1, 2005				FILED
DOCUMENT # A0100000034 1. Entity Name				2005 APR 26: PM 12: 31
VANNORTWICK INVESTMENTS, LTD.				SECRETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business 3006 AVON CIRCLE TALLAHASSEE, FL 32312 Mailing Address 3006 AVON CIRCLE TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312				
Principal Place of Business 3. Mailing Address				
Suite, Apt. #, etc. Suite, Apt. #, etc.				02082005 Chg-LP CR2E003 (10/03)
City & State City & State			4. FEI Number APPLIED FOR 59-3689565 Applied For Not Applicable	
Zip Country	Zip Country		ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent			Name	7. Name and Address of New Registered Agent
VAN NORTWICK, WILLIAM A JR 3006 AVON CIRCLE			Street Address (P.O. Box Number is Not Acceptable)	
TALLAHASSEE, FL 32312				
			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. 1 am familiar with, and accept the obligations of registered agent.				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable				DATE
9. Capital Contributions as Shown on record. \$5,000,000.00 In FLORIDA to date. \$3,806,801-00				
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
NAME VANNORTWICK, INC.		STR	EET ADDRESS	
TY-ST-ZIP TALLAHASSEE, FL 32312		CITY	-ST-ZIP	
DOCUMENT # NAME		STR	EET ADDRESS	
TY-SI-ZIP		ст	-ST-ZIP	300054343833 05/12/0501079008 **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)(i), Florida Statutes. I further certify that the information in dicated 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: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER PROPERTY Date Dayling Phone 4				