


# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

**Due By September 7, 2005**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 SEP -6 AM 9:49

<b>DOCUMENT # A01000000764</b> 1. Entity Name HOBBY FAMILY LIMITED PARTNERSHIP, LLP					
Principal Place of Business 1537 CORAL WAYS ST. PETERBURG, FL 33705			Mailing Address 1537 CORAL WAYS ST. PETERBURG, FL 33705		
2. Principal Place of Business  Suite, Apt. #, etc.		3. Mailing Address  Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-3280305</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  HOBBY, ROYCE 1537 CORAL WAYS ST. PETERBURG, FL 33705				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. <b>\$534,000.00</b>		10. Amount of Capital Contributions in FLORIDA to date. <b>638,584<sup>00</sup></b> <span style="float: right;"><b>2 Sept 05</b></span>			
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	HOBBY, ROYCE TRUSTEE 1537 CORAL WAYS ST. PETERBURG, FL 33705		STREET ADDRESS  CITY - ST - ZIP	STREET ADDRESS  CITY - ST - ZIP	
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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 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>Royce Hobby</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER <b>ROYCE HOBBY</b>		

STAPLE CHECK HERE

**2 Sept 05** (727) 865-0623  
 Date Daytime Phone #