

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By September 7, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JUL -8 AM 10:40

DOCUMENT # A01000000780

1. Entity Name
MARCELINA, LLLP



Principal Place of Business
341 PLANT AVE. SOUTH
TAMPA, FL 33606

Mailing Address
341 PLANT AVE. SOUTH
TAMPA, FL 33606

2. Principal Place of Business
2913 Safe Harbor Drive
Suite, Apt. #, etc.

3. Mailing Address
2913 Safe Harbor Drive
Suite, Apt. #, etc.



06222005 Chg-LP CR2E003 (10/03)

City & State
Tampa, FL
Zip
33618
Country

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Tampa, FL
Zip
33618
Country

4. FEI Number
59-3723475
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE., 28TH FLOOR
MIAMI, FL 33131

7. Name and Address of New Registered Agent
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. \$10,000,000.00

10. Amount of Capital Contributions in FLORIDA to date.

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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 #	P99000006909	STREET ADDRESS	2913 Safe Harbor Drive
NAME	MLDJ II, INC.	CITY-ST-ZIP	Tampa, FL 33618
STREET ADDRESS	341 PLANT AVE. SOUTH		
CITY-ST-ZIP	TAMPA, FL 33606		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

6-24-2005 813-390-3333

Date Daytime Phone #

MAUREEN A. ROBECH, PRESIDENT, MLDJ II, INC.

STAPLE CHECK HERE