

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A01000000811

FILED  
Apr 14, 2005  
Secretary of State

**Entity Name:** BAY ALLIANCE LIMITED PARTNERSHIP

**Current Principal Place of Business:**

226 COLLEGE AVE.  
PANAMA CITY, FL 32401

**New Principal Place of Business:**

**Current Mailing Address:**

226 COLLEGE AVE.  
PANAMA CITY, FL 32401

**New Mailing Address:**

**FEI Number:** 91-2135583

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHUBERT, NATALIE T  
226 COLLEGE AVE.  
PANAMA CITY, FL 32401 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Capital Contributions as Shown on record:** 1,000.00

**Amount of Capital Contributions in Florida to date:** 1,000.00

**GENERAL PARTNER INFORMATION:**

Document #: P01000013878  
Name: EMERALD FUNDING GROUP, INC.  
Address: 226 COLLEGE AVE.  
City-St-Zip: PANAMA CITY, FL 32401

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: NATALIE T. SCHUBERT

GP

04/14/2005

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date