2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

CHECK

STAPLE

2005 APR 13 AM 9: 36 **DOCUMENT # A01000001288** SECRETARY OF STATE TALLAHASSEE, FLORIDA 1. Entity Name MERL INVESTMENTS, LTD. Principal Place of Business Mailing Address 4928 S.W. 26TH AVE. 4928 S.W. 26TH AVE. CAPE CORAL, FL 33914 CAPE CORAL, FL 33914 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02252005 Chg-LP CR2E003 (10/03) City & State City & State 4. FEI Number Applied For 59-3745965 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARGARET WEBER M&W AGENTS, INC. Street Address (P.O. Box Number is Not Acceptable)
4928 SW 26TH AVE 2101 CORPORATE BLVD. **SUITE 107** BOCA RATON, FL 33431 CORAL 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 9. Capital Contributions 10. Amount of Capital Contributions \$20,000,000.00 1,297,917.00 as Shown on record. 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. 12. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 13. DOCUMENT # STREET ADDRESS MERL HOLDINGS, INC. NAME STREET ADDRESS 4928 S.W. 26TH AVE. CITY-ST-ZIP CITY-ST-ZIP CAPE CORAL, FL 33914 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP 05/09/05--01006--002 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-7IP 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 Jan aut 7. Weker

FILED

Daytime Phone #