2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

HERE

STAPLE CHECK

SIGNATURE:

FILEU SECRETARY OF STATE DIVISION OF CORPORATIONS DOCUMENT # A01000001437 1. Entity Name

DUBEY PROPERTIES, LTD. 05 MAY 27 AM 10: 15 Mailing Address Principal Place of Business % JOHN K. HUMPHRESS % JOHN K. HUMPHRESS 1040 E. PARK AVE. 1040 E. PARK AVE. TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04272005 CR2E003 (10/03) Chg-LP Applied For 4. FEI Number City & State City & State 59-3750545 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HUMPHRESS, JOHN K Street Address (P.O. Box Number is Not Acceptable) 1040 EAST PARK AVENUE TALLAHASSEE, FL 32301 City 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 Signature, typed or printed name of registered agent and little if applicable. DATE 9. Capital Contributions 10. Amount of Capital Contributions \$4,683,084.00 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. 13. 700055310007 06/18/05--01001--009 **52 DOCUMENT # STREET ADDRESS NAME DUBEY, DONNA STREET ADDRESS 8232 HUNTER RIDGE TRAIL CITY-ST-7IP CITY-ST-ZIP TALLHASSEE, FL 32312 DOCUMENT # STREET ADDRESS FESSLER, MARIE D STREET ADDRESS 1908 AYRSHIER PLACE CITY-ST-ZIP CITY-ST-ZIP **OVIEDO, FL 32765** DOCUMENT # STREET ADDRESS HUMPHRESS, JOHN K STREET ADDRESS 1040 EAST PARK AVE. CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE, FL 32301 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 14. I hyreby 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 integrated 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.