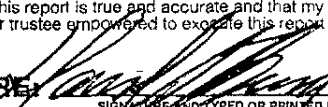


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
May 11, 2005 08:00 AM
Secretary of State

DOCUMENT # A01000001491 1. Entity Name BAHIA VISTA ASSOCIATES, L.L.P.					
Principal Place of Business C/O DAVID S. BAND, GENERAL PARTNER 240 S. PINEAPPLE AVE., 10TH FLOOR SARASOTA, FL 34326			Mailing Address C/O DAVID S. BAND, GENERAL PARTNER P.O. BOX 49948 SARASOTA, FL 34230-6948		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-1152858	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent KAUFFMAN, MARK S 455 LONGBOAT CLUB ROAD, PH-4 LONGBOAT KEY, FL 34228				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				DATE	
SIGNATURE _____ Signature, typed or printed name of registered agent and file if applicable					
9. Capital Contributions as Shown on record. \$1,400,000.00			10. Amount of Capital Contributions 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			13. ADDRESS CHANGES ONLY		
DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS	240 S. PINEAPPLE AVE., 10TH FLOOR		CITY-ST-ZIP		
CITY-ST-ZIP	SARASOTA, FL 34326		STREET ADDRESS		
DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS	THE KAUFFMAN FAMILY PARTNERSHIP #2, LTD.		CITY-ST-ZIP		
CITY-ST-ZIP	455 LONGBOAT CLUB ROAD PH4		STREET ADDRESS		
DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS	LONGBOAT KEY, FL 34228		CITY-ST-ZIP		
CITY-ST-ZIP			STREET ADDRESS		
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DOCUMENT #	NAME		STREET ADDRESS		
STREET ADDRESS			CITY-ST-ZIP		
CITY-ST-ZIP			STREET ADDRESS		
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 			David S. Band, General Ptr. 3/25/05 941-366-6660		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		



02232005 Chg-LP CR2E003 (10/03)

4. FEI Number
65-1152858

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

**KAUFFMAN, MARK S
 455 LONGBOAT CLUB ROAD, PH-4
 LONGBOAT KEY, FL 34228**

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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SIGNATURE _____
Signature, typed or printed name of registered agent and file if applicable DATE

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10. Amount of Capital Contributions in FLORIDA to date.

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DOCUMENT #
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 CITY-ST-ZIP

**BAND, DAVID S
 240 S. PINEAPPLE AVE., 10TH FLOOR
 SARASOTA, FL 34326**

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

**A95000001855
 THE KAUFFMAN FAMILY PARTNERSHIP #2, LTD.
 455 LONGBOAT CLUB ROAD PH4
 LONGBOAT KEY, FL 34228**

STREET ADDRESS
 CITY-ST-ZIP

DOCUMENT #
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 STREET ADDRESS
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 CITY-ST-ZIP

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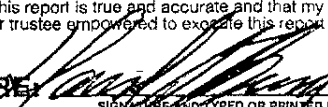
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SIGNATURE  **David S. Band, General Ptr. 3/25/05 941-366-6660**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE