

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 FEB 18 AM 8:23

DOCUMENT # A01874

1. Entity Name
BIG BEND FARMS, LTD.



Principal Place of Business
2560 BARNETT PLAZA
101 E. KENNEDY BLVD.
TAMPA, FL 33602

Mailing Address
PO BOX 1102
TAMPA, FL 33601-1102

2. Principal Place of Business
101 E. Kennedy Blvd
Suite, Apt. #, etc.
Suite 2700

3. Mailing Address
Suite, Apt. #, etc.



02072005 Chg-LP CR2E003 (10/03)

City & State
Tampa, FL 33602

City & State

4. FEI Number
59-1434550

Applied For
Not Applicable

Zip Country Zip Country

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

6. Name and Address of Current Registered Agent
GARCIA, JOSEPH
2560 BARNETT PLAZA
TAMPA, FL 33602
101 E. Kennedy Blvd., Suite 2700
Tampa, FL 33602

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. \$225,000.00

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 #		STREET ADDRESS	
NAME	GARCIA, JOSEPH	CITY-ST-ZIP	
STREET ADDRESS	2014 WOODBERRY ROAD		
CITY-ST-ZIP	BRANDON, FL 33510		
DOCUMENT #		STREET ADDRESS	
NAME	CAREY, GERTRUDE E	CITY-ST-ZIP	
STREET ADDRESS	1602 COTTAGEWOOD DRIVE		
CITY-ST-ZIP	BRANDON, FL 33510		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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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: _____ Date: 2/7/05 Daytime Phone #: 813-222-8505
Signature and Typed or Printed Name of Signing General Partner: Joseph Garcia, Gen. Partner

STAPLE CHECK HERE