2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
2005 APR 14 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A02000000181

1. Entity Name
SPF HOLDINGS, LLLP

Principal Place of Business	Mailing Address
832 FLEMING DRIVE BELLE GLADE, FL 33430	P.O. BOX 1597 BELLE GLADE, FL 33430

04082005 Chg-LP CR2E003 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 04-3602179 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

NOWICKI, MARK J ESQ.
14155 U.S. HIGHWAY ONE, SUITE 210
JUNO BEACH, FL 33408

7. Name and Address of New Registered Agent

Name John Stevens
Street Address (P.O. Box Number is Not Acceptable)
832 Fleming Drive
City Belle Glade FL Zip Code 33430

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 John Stevens John Stevens 4/10/05
Signature, typed or printed name of registered agent and title if applicable — DATE

9. Capital Contributions as Shown on record. $6,086,420.00

10. Amount of Capital Contributions in FLORIDA to date. 1,360,913

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	STEVENS, PATRICIA C TRUSTEE	CITY-ST-ZIP	
STREET ADDRESS	P.O. BOX 1597		
CITY-ST-ZIP	BELLE GLADE, FL 33430		
DOCUMENT #		STREET ADDRESS	
NAME	STEVENS, FREDERICK D TRUSTEE	CITY-ST-ZIP	
STREET ADDRESS	P.O. BOX 1597		
CITY-ST-ZIP	BELLE GLADE, FL 33430		
DOCUMENT #		STREET ADDRESS	800054021048 05/06/05--01080--024 **526.25
NAME	STEVENS, JOHN M	CITY-ST-ZIP	
STREET ADDRESS	P.O. BOX 642		
CITY-ST-ZIP	BELLE GLADE, FL 33430		
DOCUMENT #		STREET ADDRESS	
NAME	MCMILLAN, SUSAN	CITY-ST-ZIP	
STREET ADDRESS	721 TABIT ROAD		
CITY-ST-ZIP	BELLE GLADE, FL 33430		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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: John Stevens John Stevens 4/10/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #