


**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2005**

**FILED**  
**Apr 26, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A02000000921</b> 1. Entity Name <b>JASPER 26 INVESTMENTS, LTD.</b>	
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Principal Place of Business <b>4126 LASALLE DRIVE PALM HARBOR FL 34685</b>	Mailing Address <b>4126 LASALLE DRIVE PALM HARBOR FL 34685</b>
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2. Principal Place of Business Suite, Apt #, etc.	3. Mailing Address Suite, Apt #, etc.
City & State	City & State
Zip Country	Zip Country



1ST MOORE CR2E003 (10/04)

4. FEI Number <b>14-1837415</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent <b>RIEF, FRANK J III 442 WEST KENNEDY BLVD., SUITE 340 TAMPA FL 33606</b>	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	11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.
SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE	
9. Capital Contributions as Shown on record. <b>\$1,349,000.00</b>	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 CITY- ST- ZIP <b>ZILBERBERG, PAULINE L 4126 LASALLE DRIVE PALM HARBOR FL 34685</b>	STREET ADDRESS CITY- ST- ZIP <b>000000331210 04/26/05-80007-007 526.25</b>
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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)(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: <i>Pauline L. Zilberberg</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	4/12/05 927-945-1277 Date Daytime Phone #
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