

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

2005 MAY -2 PM 1:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A02000001007

1. Entity Name
MBKK PROPERTIES, LTD.



Principal Place of Business
455 LONGBOAT CLUB ROAD #PH4
LONGBOAT KEY, FL 34228

Mailing Address
1937 GOLF STREET
SARASOTA, FL 34236

2. Principal Place of Business

3. Mailing Address

711 S. OSPREY AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 1

City & State

City & State

SARASOTA FL

Zip

Country

Zip

Country

34236

03172005

Chg-LP

CR2E003 (10/03)

4. FEI Number

54-2064268

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MORAN, JOHN A
DUNLAP & MORAN, P.A.
22 SOUTH LINKS AVENUE, SUITE 300
SARASOTA, FL 34236

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
as Shown on record.

\$2,963,000.00

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 # L02000018660
NAME MK PROPERTIES OF SRQ, L.L.C.
STREET ADDRESS 455 LONGBOAT CLUB ROAD #PH4
CITY-ST-ZIP LONGBOAT KEY, FL 34228

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

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:

Mark Keittman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/19/05

841-383-3220

Date

Daytime Phone #

STAPLE CHECK HERE