


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

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

DOCUMENT # A02000001095		
1. Entity Name CLIPPER PROPERTIES LIMITED PARTNERSHIP		

Principal Place of Business 3343 NE 166TH STREET N. MIAMI BEACH, FL 33160	Mailing Address 3343 NE 166TH STREET N. MIAMI BEACH, FL 33160
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



04282005 Chg-LP CR2E003 (10/03)

6. Name and Address of Current Registered Agent	
RHODES, EDWARD S 3343 NE 166TH STREET N. MIAMI BEACH, FL 33160	

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 date if applicable.

9. Capital Contributions as Shown on record. \$5,000,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$862,000
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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 #	L02000018398	STREET ADDRESS	
NAME	CLIPPER PROPERTIES, LLC	CITY - ST - ZIP	
STREET ADDRESS	3343 NE 166TH ST.		
CITY - ST - ZIP	N. MIAMI BEACH, FL 33160		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
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05/11/05-80007-023 526.25

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: *Edward S Rhodes MGRM for Clipper Properties, LLC* 4-27-05 305-940-6518
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE