2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

			May 1, 200	5	,	٦		£1.
DOCUMENT # A02000001096							0.	1/ /-
1. Entity Name TOLL ESTERO LIMITED PARTNERSHIP							OS APA TALIAGE	FILED RY OF STATE ORION
Principal Plac	e of Busines	S	Mailing Address	·· ·		1	AHAS	$R_{Y_{O_E}} = 0.00$
3103 PHILMONT AVENUE			3103 PHILMONT AVENUE			٠,	SEE. ESTATE	
HUNTINGDOM	N VALLEY, P	A 19006	HUNTINGDON VALL	TINGDON VALLEY, PA 19006				CORINA
					(I)	Å HAMBAHA		III AANA CORALAINI ACHT TANG AMAN ER IGAL
Principal Place of Business 3. Mailing Address					1 51			
250 Gibraltar Road				250 Gibraltar Road			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-LP	CR2E003 (10/03)
City & State			City & State	•		4. FEI Number		Applied For
	Horsham, PA			Horsham, PA Zip Country		72-15392	292	Not Applicable
Zip 19044		Country Montgomery	Zip 19044	1	ntry tgomery	5. Certificate of	Status Desired	S8.75 Additional Fee Required
13044	6. Name	and Address of Current		TIOH	Legomery	7. Name and A	ddress of New F	Registered Agent
0.7.0000	Name							
C T CORP		N SYSTEM ISLAND ROAD			Street Address (P.O. Box Number is Not Acceptable)			
PLANTATI								·
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İ					City			FL Zip Code
		y submits this statement for tered agent.	or the purpose of changin	g its register	red office or registe	red agent, or both,	in the State of Flo	orida. I am familiar with, and accept
the obligat	ions of regis	tered agent.						
SIGNATURE -	Signature, typed	or printed name of registered agent	and title if applicable					DATE
	9. Capital Contributions 10. Amount of Capital Contributions							
as Shown	on record.	\$9,500.00	in FLORIDA	to date.	\$9,50	00.00		
	A (GENERAL PARTNER 1 : General Partners MA	HAT IS A BUSINESS	ENTITY N	JUST BE REGIS	TERED AND AC	TIVE WITH TH	IIS OFFICE.
12.	11012	GENERAL PARTNE		13.		it must be med	ADDRESS CH	
DOCUMENT ≠	P9400008	32800	cTI	REET ADDRESS 25	DRESS 250 Gibraltar Road			
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NAME				214	REET ADDRESS			
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CITY-ST-ZIP								
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DOCUMENT #				STR	EET ADDRESS			
STREET AUDRESS				I	4 67 7/2			
CITY-ST-ZP					Y-ST-ZIP			
14. I hereby of indicated	ertify that th	e information supplied with	this filing does not qualify that my signature wall h	y for the exe	emption stated in Se le legal effect as if	ection 119.07(3)(i), I	Florida Statutes.	I further certify that the information all Partner of the limited partnership or
the receiv	er or trustee	empowered to execute th	is report/as required by	hapter 620	Florida Statutes			Date of the winter parties of the
CICNIAT	upe/	Z1///	//////				4/01/05	
SIGNAT		SIGNATURE AND THE OF	PRINTED NAME OF SIGNING GE	NERAL PARTN	ER .			Daytime Phone #
	- 1	fark J. Warsh a	uer, VP of To	oli FL	GP Corp.,	General 1	Partner	· · · · · · · · · · · · · · · · · · ·