2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

	DOCUMENT # A02000001117 1. Entity Name SEMBLER E.D.P. PARTNERSHIP #20, LTD,							TALLAHASSEE, FLORIFE					
	Principal Place 5858 CENTR ST PETERSBI		33743-	1847				` \	RIEA				
-	2. Principal Place of Business 3.			3. Mailing Address	Mailing Address								
-	Suite, Apt. #, etc.			Suite, Apt. #, etc.	/	//	70	4062005	Chg-LP	CR2E	003 (10	(03)	
	City & State			City & State	City & State		4.	FEI Number 71-09026	04			Applied For Not Applicable	
	Zip	Cou	intry	Zip	Cour	ntry	5.	Certificate of S	Status Desired	×	\$8.75 Fee Re	Additional quired	
F	6. Name and Address of Current Registered Agent					Name	7.	Name and Ad	dress of New R	egistered	Agent		
	SHER, CRAIG H 5858 CENTRAL AVENUE ST PETERSBURG, FL 33707						ess (P.O.	Box Number is	Not Acceptable) FI	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, typod or printed name of registered agent and title if applicable.												
		9. Capital Contributions as Shown on record. \$502,672.50 10. Amount of Capital in FLORIDA to da				butions g	19.0	٥٥					
	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.												
ļ	12. GENERAL PARTNER INFORMATION				13.				ADDRESS CHA				
	DOCUMENT / NAME	P9600003312 SEMBLER RETAIL, INC.				EET ADDRESS	-	<u></u>					
	STREET ADDRESS	5858 CENTRAL ST PETERSBU			CITY			800054755718 05/13/05-01005024 **150				8 150.00	
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STAP	DOCUMENT #				STF	EET ADDRESS							
	STREET ADDRESS CITY-ST-ZIP					Y-ST-ZIP							
		4. 1 hereby certify that the information supplied with this filling 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 rejort as required by Chapter 620, Florida Statutes SIGNATURE:											

CRAIG SHER, PRESIDENT