

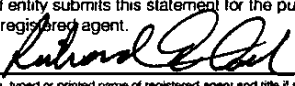
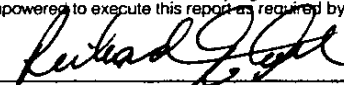


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Apr 22, 2005 8:00 am
Secretary of State

DOCUMENT # A02000001171 1. Entity Name VILLAS-SAN MARCO, LTD.					
Principal Place of Business 1500 N. FEDERAL HIGHWAY, SUITE 202 FT. LAUDERDALE, FL 33304				Mailing Address 1500 N. FEDERAL HIGHWAY, SUITE 202 FT. LAUDERDALE, FL 33304	
2. Principal Place of Business 1817 ATLANTIC BLVD. Suite, Apt. #, etc.		3. Mailing Address 1817 ATLANTIC BLVD. Suite, Apt. #, etc.			
City & State JACKSONVILLE		City & State JACKSONVILLE		4. FEI Number 83-0352835	
Zip 32207		Country FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COOK, RICHARD E 1500 N. FEDERAL HIGHWAY, SUITE 202 FT. LAUDERDALE, FL 33304				7. Name and Address of New Registered Agent Name COOK, RICHARD E. Street Address (P.O. Box Number is Not Acceptable) 1817 ATLANTIC BLVD. City JACKSONVILLE FL Zip Code 32207	
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 4/21/2005 <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$100.00		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 # P98000096251 NAME REC SUB IV DEVELOPMENT, INC. STREET ADDRESS 1500 N. FEDERAL HIGHWAY, SUITE 202 CITY-ST-ZIP FT. LAUDERDALE, FL 33304			STREET ADDRESS 1817 ATLANTIC BLVD. CITY-ST-ZIP JACKSONVILLE, FL. 32207		
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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:  DATE 4/21/05 DAYTIME PHONE # 904 346-0017 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					

STAPLE CHECK HERE