

**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2005**

DOCUMENT # A02000001279		
1. Entity Name SOTTIL GALLERY PARTNERS, LTD		

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 APR 12 AM 10:40

Principal Place of Business 170 SUNPORT LANE SUITE 900 ORLANDO FL 32809	Mailing Address 170 SUNPORT LANE SUITE 900 ORLANDO FL 32809
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1ST MOORE CR2E003 (10/04)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number <b>APPLIED FOR</b>	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  GOMEZ, OCTAVIO 671 W. FRONT STREET SUITE 220 CELEBRATION FL 34747	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 170 Sunport Lane Suite 900 City Orlando FL Zip Code 32809	
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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. \$150,000.00	10. Amount of Capital Contributions in FLORIDA to date. 260,000.00

11. FILE NOW!!! Due by May 1, 2005.  
See Block 11 instructions for fee info.

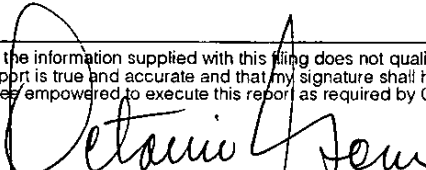
**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	GOMEZ, OCTAVIO
NAME	671 W. FRONT STREET, SUITE 220
STREET ADDRESS	CELEBRATION FL 34747
CITY-ST-ZIP	
DOCUMENT #	GRAY, DAVID
NAME	671 W. FRONT STREET, SUITE 220
STREET ADDRESS	CELEBRATION FL 34747
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	170 Sunport Lane Suite 900
CITY-ST-ZIP	Orlando FL 32809
STREET ADDRESS	Address Change Above
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

526.25 AR FF  
8.75 CUS  
535.00 Total

600050877 4/12  
04/15/05-01003-014 \*\*\*1305.00

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: 	3/19/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	Date Daytime Phone #

STAPLE CHECK HERE