



**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 7, 2005**

<b>DOCUMENT # A02000001640</b> 1. Entity Name H.L. CULBREATH FAMILY LIMITED PARTNERSHIP						FILED SECRETARY OF STATE DIVISION OF CORPORATIONS  05 JUL 20 AM 11:15	
Principal Place of Business 762 CORAL REEF DR. TAMPA, FL 33602				Mailing Address 762 CORAL REEF DR. TAMPA, FL 33602			
2. Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip                      Country				3. Mailing Address  Suite, Apt. #, etc.  City & State  Zip                      Country			
				07182005    Chg-LP    CR2E003 (10/03)			
				4. FEI Number 57-1141810		Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required			
6. Name and Address of Current Registered Agent  CULBREATH, H. LEE 762 CORAL REEF DR. TAMPA, FL 33602				7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>							
9. Capital Contributions <small>as shown on record.</small> <del>\$10,000,000.00</del> <b>1,000,000</b>				10. Amount of Capital Contributions in FLORIDA to date. <b>1,000,000</b>		In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.	
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>							
12. GENERAL PARTNER INFORMATION				13. ADDRESS CHANGES ONLY			
DOCUMENT #	NAME			STREET ADDRESS			
	CULBREATH, H. LEE III						
STREET ADDRESS	762 CORAL REEF DR.			CITY-ST-ZIP			
CITY-ST-ZIP	TAMPA, FL 33602						
DOCUMENT #	NAME			STREET ADDRESS			
	CULBREATH HELLER, KAY						
STREET ADDRESS	2308 WYOMING AVENUE NW			CITY-ST-ZIP			
CITY-ST-ZIP	WASHINGTON, DC 20008						
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CITY-ST-ZIP							
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							
<b>SIGNATURE:</b> 				7-18-05    813-227-9740			
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>				<small>Date                      Daytime Phone #</small>			

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