


**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Apr 30, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # A03000000064					
1. Entity Name HANDLEMAN INVESTMENTS LLLP					
Principal Place of Business BANK ONE, N.A. 3399 PGA BLVD., SUITE 100 PALM BEACH GARDENS, FL 33410			Mailing Address BANK ONE, N.A. 3399 PGA BLVD., SUITE 100 PALM BEACH GARDENS, FL 33410		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
GOMOLL, GARY BANK ONE, N.A. 3399 PGA BLVD., SUITE 100 PALM BEACH GARDENS, FL 33410				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL	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 <b>Bank One</b>					
SIGNATURE		<i>GARY WAYNE GOMOLL</i>		DATE 4/14/05	
9. Capital Contributions as Shown on record. \$24,000,000.00		10. Amount of Capital Contributions in FLORIDA to date. \$20,490,418.08		\$526.25	
<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 #	L03000000302		STREET ADDRESS		
NAME	HLI LLC		CITY-ST-ZIP		
STREET ADDRESS	3399 PGA BLVD., SUITE 100				
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33410				
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
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STREET ADDRESS					
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)(f), 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 file this report as required by Chapter 620, Florida Statutes.					
SIGNATURE:		<i>GARY WAYNE GOMOLL</i>		DATE 4/14/05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER					



01132005 Chg-LP CR2E003 (10/03)

4. FEI Number 76-0744835 Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

STAPLE CHECK HERE

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 04/30/05-80049-013 526.25