


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

DOCUMENT # A03000000186	
1. Entity Name GLADES PARTNERS LIMITED	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 JUN 21 AM 9:09

Principal Place of Business 1515 NORTH FEDERAL HIGHWAY SUITE 306 BOCA RATON FL 33432	Mailing Address 1515 NORTH FEDERAL HIGHWAY SUITE 306 BOCA RATON FL 33432
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



1ST MOORE CR2E003 (10/04)

4. FEI Number 06-1678483	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GENSHEIMER, MARK A 1515 NORTH FEDERAL HIGHWAY SUITE 306 BOCA RATON FL 33432	
7. Name and Address of New Registered Agent 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.		11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>		
9. Capital Contributions as Shown on record. \$1.00	10. Amount of Capital Contributions in FLORIDA to date. \$1.00	

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 #	P03000013830	STREET ADDRESS	900056634569 06/28/05--01060--006 **141.25
NAME	GLADES PARTNERS, INC.	CITY-ST-ZIP	
STREET ADDRESS	1515 NORTH FEDERAL HIGHWAY, SUITE 306		
CITY-ST-ZIP	BOCA RATON FL 33432		
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STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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: Mark A Gensheimer 7/29/05 561-750-1030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #