
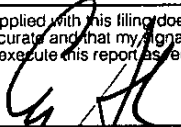


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
05 APR 29 PM 5:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| | | | | | |
|---|--------------------------|--|--|--|--|
| DOCUMENT # A03000000411 | | | |  | |
| 1. Entity Name SEMBLER BTS PARTNERSHIP #1, LTD. | | | | | |
| Principal Place of Business 5858 CENTRAL AVE. ST. PETERSBURG, FL 33743 | | | Mailing Address 5858 CENTRAL AVE. ST. PETERSBURG, FL 33743 | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip 33707 | Country | Zip 33707 | Country | 4. FEI Number 13-4244092 Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | | | | Chg-LP CR2E003 (10/03) | |
| 6. Name and Address of Current Registered Agent | | | 7. Name and Address of New Registered Agent | | |
| SHER, CRAIG H 5858 CENTRAL AVE. ST. PETERSBURG, FL 33743 | | | Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 33707 | | |
| 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 as Shown on record. \$63,855.00 | | 10. Amount of Capital Contributions in FLORIDA to date. 99.00 | | | |
| 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 # | P96000003312 | | STREET ADDRESS | | |
| NAME | SEMBLER RETAIL, INC. | | CITY-ST-ZIP | | |
| STREET ADDRESS | 5858 CENTRAL AVE. | | | | |
| CITY-ST-ZIP | ST. PETERSBURG, FL 33743 | | | | |
| DOCUMENT # | | | STREET ADDRESS | 600054757976 | |
| NAME | | | CITY-ST-ZIP | 05/19/05--01009--013 **150.00 | |
| STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | | | |
| DOCUMENT # | | | STREET ADDRESS | | |
| NAME | | | CITY-ST-ZIP | | |
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| NAME | | | CITY-ST-ZIP | | |
| 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)(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:  | | | 4/19/05 727-384-6000 Date Daytime Phone # | | |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER CRAIG H. SHER, PRESIDENT | | | | | |

STAPLE CHECK HERE