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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNI

FILED Apr 09, 2005 08:00 AM Secretary of State DOCUMENT # A03000000429 1. Entity Name WILLOW LAKE, LTD. Mailing Address Principal Place of Business 1666 KENNEDY CAUSEWAY 1666 KENNEDY CAUSEWAY SUITE #505 NORTH BAY VILLAGE FL 33141 SUITE #505 NORTH BAY VILLAGE FL 33141 2. Principal Place of Business ____ 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. 1ST MOORE CR2E003 (10/04) Applied For City & State City & State 4. FEI Number 56-2330450 Not Applicable Zip Country Ζip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MCDONOUGH, BRIAN J 2200 MUSEUM TOWER 150 WEST FLAGLER STREET MIAMI FL 33130 Street Address (P.O. Box Number is Not Acceptable) 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. DATE Signature, typed or printed name of registered agent and title if applicable 10. Amount of Capital Contributions 9. Capital Contributions \$89.00 =99.00 as Shown on record. in FLORIDA to date. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 13. 12. DOCUMENT # L03000009333 STREET ADDRESS WILLOW LAKE, LLC NAME STREET ADDRESS 1666 KENNEDY CAUSEWAY - SUITE #505 CATY-ST-7IP NORTH BAY VILLAGE FL 33141 CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS City-st-**zie** * CITY-ST-ZIP U00000294998 DOCUMENT # STREET ADDRESS STREET ADDRESS crix-Si-7r CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CUTY-ST-ZIP CITY - ST - ZIP STAPLE DOCUMENT ? STREET ADDRESS NAME STREET ADL CITY-ST-ZIP CHY-ST ZIF 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 1 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 of truetee components to execute this report as required by Chapter 620. Florida Statutes