


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 FEB 28 AM 10:58

DOCUMENT # A03000000998			
1. Entity Name HENRY TRUST COMPANY, LTD.			
Principal Place of Business 450 ROYAL PALM WAY, STE. 502 PALM BEACH, FL 33480		Mailing Address 450 ROYAL PALM WAY, STE. 502 PALM BEACH, FL 33480	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc. STE. 401		Suite, Apt. #, etc. STE. 401	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 56-2373511		Applied For Not Applicable	
5. Certificate of Status Desired		Chg-LP CR2E003 (10/03)	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
HENRY, PATRICK 450 ROYAL PALM WAY, STE. 502 PALM BEACH, FL 33480		Name Street Address (P.O. Box Number is Not Acceptable) 450 ROYAL PALM WAY, STE. 401 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.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
9. Capital Contributions as Shown on record. \$5,472,000.00		10. Amount of Capital Contributions in FLORIDA to date. \$5,472,000.00	
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 # NAME STREET ADDRESS CITY-ST-ZIP	F47506 PATHECO, INC. 450 ROYAL PALM WAY, STE. 502 PALM BEACH, FL 33480	STREET ADDRESS CITY-ST-ZIP	450 ROYAL PALM WAY, STE. 401
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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: <u>PATRICK HENRY, GENERAL PARTNER</u>		Date: 2/23/05 Daytime Phone #: 561-832-3101	

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