

2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAY 13 AM 9:30

DOCUMENT # A03000001320

1. Entity Name
LIGHTHOUSE POINTE PROJECT PARTNERSHIP, LTD.



Principal Place of Business
C/O GREENSPOON, MARDER ET AL
201 E. Pine Street, Suite 500
Orlando, Florida 32801

Mailing Address
C/O GREENSPOON, MARDER ET AL
201 E. Pine Street, Suite 500
Orlando, Florida 32801

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04222005 Chg-LP CR2E003 (10/03)

City & State

City & State

4. FEI Number
APPLIED FOR

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRAY, N. DWAYNE JR., ESQ
201 E. Pine Street, Suite 500
Orlando, Florida 32801

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.

SIGNATURE

[Signature]

4/29/05
DATE

9. Capital Contributions
as Shown or record. \$1,000.00

10. Amount of Capital Contributions
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.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # P03000099654
NAME LIGHTHOUSE POINTE GENERAL PARTNER, INC
STREET ADDRESS 201 E. Pine Street, Suite 500
CITY-ST-ZIP Orlando, Florida 32801

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

900056032549
06/10/05--01064--003 **158.75

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:

[Signature]
N. DWAYNE JR., ESQ

4/29/05 407-425-6559
DATE DAYTIME PHONE #

STAPLE CHECK HERE

158.75