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

Willow Lake Operating, LLC

SIGNATURE:

DOCUMENT # A0300001463 1. Entity Name *					SECRETARY OF STATE DIVISION OF CORPORATIONS		
WILLOW LAKE APARTMENTS, LLIJP					O5 JUN	20 AM 8:27	
Principal Place	e of Business	Mailing Address					
1555 PALM BEACH LAKES BLVD., STE. 110 WEST PALM BEACH FL 33401 1555 PALM BEACH I WEST PALM BEACH			KES BI	VD., STE. 110	. 1		
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc. Suite #1100		Suite, Apt. #, etc. Suite #1100		1ST MOC	RE CR2E003	` <u> </u>	
City & State		City & State		4. FEI Number			
Zip	Country	Zip	Coun	try	5. Certificate of Statu	is Desired (2)	\$8.75 Additional Fee Required
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent Name			
E. LLOYD ECCLESTONE 1555 PALM BEACH LAKES BLVD., STE. 1100 WEST PALM BEACH FL 33401				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City			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, typed or printed name of registered agent and title if applicable				DATE		11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.	
9. Capital Co as Shown		butions \$1,1	\$1,144,738.28				
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 #	£ 1,03000037164						
NAME	WILLOW LAKE OPERATING, LLC 1555 PALM BEACH LAKES BLVD., STE. 1100			ÉÉT ADDRESS			
STREET ADDRESS				'-ST-ZiP	IT-ZIP		
CITY-ST-ZIP	WEST PALM BEACH FL 33401				200056637433		
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NAME			STR	EET ADDRESS			
STREET ADDRESS CITY-ST-ZIP			CITY	Y-ST-ZIP			
indicated	certify that the information supplied with to not this report is true and accurate and yer or trustee empowered to execute the	that my signature shall have	the sam	e legal effect as if r	ection 119.07(3)(i), Flori made under oath; that I	da Statutes. I further cer am a General Partner of	tify that the information the limited partnership or

Ron Cooper

4/27/05

561-686-2000

Daytime Phone #