

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 7, 2005**


**FILED**

2005 NOV 21 AM 9: 59

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # A04000000123

1. Entity Name  
 THE NABHAN FAMILY LIMITED PARTNERSHIP




Principal Place of Business  
 442 SOUTH COUNTRY CLUB DRIVE  
 ATLANTIS, FL 33462

Mailing Address  
 442 SOUTH COUNTRY CLUB DRIVE  
 ATLANTIS, FL 33462

2. Principal Place of Business  
 Suite, Apt. #, etc.  
 City & State  
 Zip

3. Mailing Address  
 Suite, Apt. #, etc.  
 City & State  
 Zip



07262005 Chg-LP CR2E003 (10/03)

4. FEI Number  
 04-3533975

Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

NABHAN, EDWARD N  
 442 SOUTH COUNTRY CLUB DRIVE  
 ATLANTIS, FL 33462

7. Name and Address of New Registered Agent

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: Edward M Nabhan G/P DATE: 8/9/05

9. Capital Contributions as Shown on record. 5,111,722

10. Amount of Capital Contributions in FLORIDA to date. 1,111,722

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**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 #	NABHAN, EDWARD	STREET ADDRESS	
NAME	442 SOUTH COUNTRY CLUB DRIVE	CITY-ST-ZIP	800061604468
STREET ADDRESS	ATLANTIS, FL 33462		11/21/05 01000 022 **526.25
CITY-ST-ZIP		STREET ADDRESS	
DOCUMENT #		CITY-ST-ZIP	
NAME		STREET ADDRESS	
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CITY-ST-ZIP		STREET ADDRESS	

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**ANNOUNCEMENT 05**

*[Handwritten Signature]*

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: Edward M Nabhan G/P DATE: 9/6/05 DAYTIME PHONE # 561-9628294 FL, 508-754-3927 MASS