

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

DOCUMENT #A04000000132	
1. Entity Name NEW SUCCESS HOMEBUYERS, LTD.	



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 JUN 27 AM 9:58

Principal Place of Business 1121 S. MILITARY TRAIL #264 DEERFIELD BEACH, FL 33442	Mailing Address 318 POPLAR POINT DR. KELOWNA BRITISH COLUMBIA CANADA V1Y1Y1, XX
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

04272005 Chg-LP CR2E003 (10/03)

4. FEI Number  
20-2557692

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent AMSCO MARKETING, LLC 1121 S. MILITARY TRAIL #264 DEERFIELD BEACH, FL 33442
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent, and date if applicable.

9. Capital Contributions as Shown on record. \$100.00	10. Amount of Capital Contributions in FLORIDA to date. \$100.00	DATE 06/25
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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	
DOCUMENT #	NAME
NAME	RACKOW, BERYL
STREET ADDRESS	318 POPLAR POINT DR.
CITY-ST-ZIP	KELOWNA, BC V1Y1Y1
DOCUMENT #	NAME
NAME	MOLLER, ERIC
STREET ADDRESS	318 S. POPLAR POINT DR.
CITY-ST-ZIP	KELOWNA, BC V1Y1Y1
DOCUMENT #	NAME
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	NAME
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	NAME
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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: B. Rackow June 16, 2005  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone # 250-7638929

STAPLE CHECK HERE