

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

FILED

2005 APR 21 PM 2:14

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # A04000000262	
1. Entity Name	
MERRILL CROSSINGS, LTD.	



Principal Place of Business	Mailing Address
1666 KENNEDY CAUSEWAY, STE 505 NORTH BAY VILLAGE FL 33141	1666 KENNEDY CAUSEWAY, STE 505 NORTH BAY VILLAGE FL 33141

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1ST MOORE CR2E003 (10/04)

4. FEI Number	Applied For
20-0800754	Not Applicable
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	
MCDONOUGH, BRIAN J 2200 MUSEUM TOWER 150 WEST FLAGLER ST MIAMI FL 33130		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.		11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and state applicable		
9. Capital Contributions as Shown on record.	\$99.00	10. Amount of Capital Contributions in FLORIDA to date. \$99.00

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 #	L04000012787	STREET ADDRESS	000000294965
NAME	MERRILL CROSSINGS, LLC	CITY-ST-ZIP	04/09/05-80010-001 141.25
STREET ADDRESS	1666 KENNEDY CAUSEWAY, STE 505		
CITY-ST-ZIP	NORTH BAY VILLAGE FL 33141		
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STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

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:	Francis Lopez Vice Pres. of its Gen'l Partner 2/10/05 (305) 538-9572 EXT: 103
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	