2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

TILED SECRETARY OF STATE DIVISION OF CORPORATIONS **DOCUMENT # A0400000331** PAINTED WOODS PROPERTIES LTD 05 FEB 15 AM 8: 43 Principal Place of Business Mailing Address **6285 MARK LANE 6285 MARK LANE** FORT MYERS, FL 33912 FORT MYERS, FL 33912 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02072005 CR2E003 (10/03) 4. FEI Number 20 - 08 07 478 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BEIERLE, SCOTT F Street Address (P.O. Box Number is Not Acceptable) 6285 MARK LANE FORT MYERS, FL 33912 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions \$50.00 in FLORIDA to date. as Shown on record. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. 13. DOCUMENT # STREET ADDRESS NAME BEIERLE, SCOTT F STREET ADDRESS 6285 MARK LANE CITY-ST-7(P CITY-ST-ZIP FORT MYERS, FL 33912 DOCUMENT # STREET ADDRESS BEIERLE, BERNIE C NAME STREET ADDRESS 2507 AVE D EAST CITY-ST-ZIP CITY-ST-7IP BISMARCK, ND 58501 DOCUMENT # STREET ADDRESS NAME 400047143964 02/23/05--01041--018 **141 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP STAPLE CHECK HERE CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7/P 14. I hereby certify that the information supplied with this fiting does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information findicated 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. 02/08/05 239-225. SI@NATURE: