


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


DOCUMENT # A04000000792	
1. Entity Name FLORIDA VINERIDGE HOLDINGS, LTD.	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

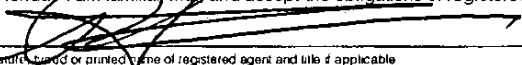
05 MAR -9 AM 10: 05

Principal Place of Business 7320 E FLETCHER AVE, STE 110 TAMPA FL 33637	Mailing Address 7320 E FLETCHER AVE, STE 110 TAMPA FL 33637
---	---

2. Principal Place of Business 8402 Laurel Fair Cir Suite 205 Tampa FL 33610 USA	3. Mailing Address 8402 Laurel Fair Cir Suite 205 Tampa FL 33610 USA
--	--


1ST MOORE CR2E003 (10/04)
4. EEI Number 30-0252757
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BURNETT, ROBERT J ESQ 3111 STIRLING RD FT LAUDERDALE FL 33312	7. Name and Address of New Registered Agent Nash, Thomas C II 625 Court Street Ste 200 Clearwater FL 33756
---	--

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
9. Capital Contributions as Shown on record. \$100.00	10. Amount of Capital Contributions in FLORIDA to date.

11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.

**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 #	L04000036701
NAME	FLORIDA VINERIDGE REALTY, LLC
STREET ADDRESS	7320 E FLETCHER AVE, STE 110
CITY-ST-ZIP	TAMPA FL 33637
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	8402 Laurel Fair Cir Ste 205
CITY-ST-ZIP	Tampa FL 33610
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	LLP050001622-3
CITY-ST-ZIP	03/16/05--01009--001 **141.25
STREET ADDRESS	LLP050001623-1
CITY-ST-ZIP	03/16/05--01009--002 **8.75
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: 	DATE	Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		

STAPLE CHECK HERE