


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 FEB 28 AM 11:10

DOCUMENT # A04000001089			
1. Entity Name BILL AND SHELLEY PARTNERSHIP LP LTD			
Principal Place of Business 335 13TH ST. KEY COLONY BEACH, FL 33051 US		Mailing Address 335 13TH STREET KEY COLONY BEACH, FL 33051 US	
2. Principal Place of Business		3. Mailing Address PO Box 511242	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Key Colony Beach FL	
Zip 33051-1242	Country	Zip 33051-1242	Country
01082005 Chg-LP		CR2E003 (10/03)	
4. FEI Number 49-1909275		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PACKER, WILLIAM E 335 13TH STREET KEY COLONY BEACH, FL 33051		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 33051-1242	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
9. Capital Contributions as Shown on record. \$100.00		10. Amount of Capital Contributions in FLORIDA to date. 100.00	
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 #	NAME	STREET ADDRESS	
NAME	PACKER, WILLIAM E	CITY-ST-ZIP	33051-1242
STREET ADDRESS	335 13TH STREET		
CITY-ST-ZIP	KEY COLONY BEACH, FL 33051		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	PACKER, SHELLEY A	CITY-ST-ZIP	33051-1242
STREET ADDRESS	335 13TH STREET		
CITY-ST-ZIP	KEY COLONY BEACH, FL 33051		
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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: William E Packer		1-8-05 305 304 9198	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER		Date Daytime Phone #	

STAPLE CHECK HERE