2005 LIMITED PARTNERSHIP ANNUAL REPORT

FILLU **Due By May 1, 2005** SECRETARY OF STATE DIVISION OF CORPORATIONS **DOCUMENT # A0400001265** 1. Entity Name 05 FEB 22 AM 9: 03 CENTRUM-ESTERO LIMITED PARTNERSHIP Principal Place of Business Mailing Address 21400 RIDGETOP CIRCLE, SUITE 250 21400 RIDGETOP CIRCLE, SUITE 250 STERLING, VA 20166 STERLING, VA 20166 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042005 CR2E003 (10/03) Applied For City & State City & State 4. FEI Number 41-2159268 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City Zip Code FL 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 Signature, typod or printed name of registered agent and 856 if applicable DATE 10. Amount of Capital Contributions 9. Capital Contributions \$99.00 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. ADDRESS CHANGES ONLY 12. GENERAL PARTNER INFORMATION DOCUMENT # L04000054718 STREET ADDRESS CP ESTERO, LLC MAME STREET ADDRESS 21400 RIDGETOP CIRCLE, SUITE 250 CITY-ST-ZIP CITY-ST-ZIP STERLING, VA 20166 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT (STREET ADDRESS NAME 300047508053 03/01/05--01053--005 **141.25 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS HALIF STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP DOCUMENT A STREET ADDRESS

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.

CITY - ST - 7IP

TYPED OF PRINTED NAME OF SIGN

STAPLE CHECK HERE

NAME STREET #ADDRESS

CITY-ST-7IP

William M. Bynum, Secretary of

Third Centrum of Virginia Inc., Managing Member of