


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

DOCUMENT # A04000001461 1. Entity Name BUTTERS REAL ESTATE FUND I, LTD.					
Principal Place of Business 4811 LYONS TECHNOLOGY PARYWAY SUITE 6 COCONUT CREEK, FL 33073			Mailing Address 4811 LYONS TECHNOLOGY PARYWAY SUITE 6 COCONUT CREEK, FL 33073		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BUTTERS, MALCOLM 4811 LYONS TECHNOLOGY PARYWAY SUITE 6 COCONUT CREEK, FL 33073				Name Malcolm Butters Street Address (P.O. Box Number is Not Acceptable) 1096 E. Newport Center Dr. #100 City Deerfield Beach FL Zip Code 33442	
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 Malcolm Butters DATE 4/28/05 <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$1,900,000.00			10. Amount of Capital Contributions in FLORIDA to date.		
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 #	L04000066337		STREET ADDRESS	1096 E. Newport Center Dr. #100	
NAME	BUTTERS CAPITAL I, LLC		CITY-ST-ZIP	Deerfield Beach, FL 33442	
STREET ADDRESS	4811 LYONS TECHNOLOGY PARYWAY				
CITY-ST-ZIP	COCONUT CREEK, FL 33073				
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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: Malcolm Butters DATE 4/28/05 DAYTIME PHONE # 954-570-8111 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE
FLORIDA



04132005 Chg-LP CR2E003 (10/03)

4. FEI Number **27-0108945** Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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