2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

DOCUMENT # A04000001463

1. Entity Name
MOHICAN ENTERPRISES, LLLP

FILED
2005 APR 14 PM 1:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
4133 ORR RANCH ROAD SANTA ROSA, CA 95404	4133 ORR RANCH ROAD SANTA ROSA, CA 95404

01042005 Chg-LP CR2E003 (10/03)

2. Principal Place of Business		3. Mailing Address	
1000 Vicars Landing		1000 Vicars Landing	
Suite, Apt. #, etc. A-204		Suite, Apt. #, etc. A-204	
City & State Ponte Vedra Bch, FL		City & State Ponte Vedra Bch, FL	
Zip 32082	Country St. Johns	Zip 32082	Country St. Johns

4. FEI Number 20-1608299 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PEEK, JACOB R 1 INDEPENDENT DRIVE, SUITE 2600 JACKSONVILLE, FL 32202	Name Street Address (P.O. Box Number is Not Acceptable) City FL 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. I am 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 as Shown on record.	10. Amount of Capital Contributions in FLORIDA to date.	11.
$7,000,000.00	6,374,262.00	$526.25

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 #	P04000128623	STREET ADDRESS	
NAME	HEADING UP, INC.		
STREET ADDRESS	4133 ORR RANCH ROAD	CITY-ST-ZIP	
CITY-ST-ZIP	SANTA ROSA, CA 95404		
DOCUMENT #		STREET ADDRESS	500054020735 05/06/05--01030--016 **526.25
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STAPLE CHECK HERE

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: [signature] Gregory F. Sims 4/4/05 707/585-2235
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

Pres. Heading Up, Inc.