2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

ASECRE 13 PH 3: 00

ALLAHARY OF STATE ORIGA **DOCUMENT # A0400001607** 1. Entity Name CORTEZ DEVELOPERS, LTD. Principal Place of Business Mailing Address 1551 SANDSPUR ROAD 1551 SANDSPUR ROAD MAITLAND, FL 32751 MAITLAND, FL 32751 3. Mailing Address
P-O-BUX 4961 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01062005 Chg-LP CR2E003 (10/03) Applied For City & State City & State 4. FEI Number 1744666 RUANDO 20-Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent B&C CORPORATE SERVICES OF CENT, FL., INC. Street Address (P.O. Box Number is Not Acceptable) 390 NORTH ORANGE AVENUE, STE. 1100 ORLANDO, FL 32801 Zip Code City 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. 9. Capital Contributions 10. Amount of Capital Contributions \$50.00 as Shown on record. 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 ADDRESS CHANGES ONLY 13. L04000062772 DOCUMENT # STREET ADDRESS NAME CORTEZ DEVELOPERS, L.L.C. 800050863458 STREET ADDRESS 1551 SANDSPUR ROAD CITY-ST-ZIP CITY-ST-ZIP MAITLAND, FL 32751 04/15/05--01008--016 **141.25 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT **#** STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP 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), Floride 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

BY: COPTEZ DEPENDED.

Ey general partner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER THUA DOODY, MANAGER

STAPLE CHECK