


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By September 7, 2005

FILED
05 AUG -5 AM 7:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A04000001717 1. Entity Name THE VENTURA FAMILY LIMITED PARTNERSHIP					
Principal Place of Business 3070 NW 48TH AVE., #206 LAUDERDALE LAKES, FL 33313			Mailing Address 3070 NW 48TH AVE., #206 LAUDERDALE LAKES, FL 33313		
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		
VENTURA, SAMUEL 3070 NW 48TH AVE., #206 LAUDERDALE LAKES, FL 33313			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$1,000.00		10. Amount of Capital Contributions in FLORIDA to date.		In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.	
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	VENTURA, SAMUEL		CITY-ST-ZIP		
STREET ADDRESS	3070 NW 48TH AVE., #206				
CITY-ST-ZIP	LAUDERDALE LAKES, FL 33313				
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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: X _____ <small>SIGNATURE AND TYPE OF PRINTER NAME OF SIGNING GENERAL PARTNER</small>					
				Date _____ Daytime Phone # _____	

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