

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 FEB -7 AM 9:38

DOCUMENT # A04000001719 1. Entity Name SPYGLASS SOUTH, LLLP					
Principal Place of Business 931 STRATFORD PLACE MELBOURNE, FL 32940			Mailing Address 931 STRATFORD PLACE MELBOURNE, FL 32940		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01202005 Chg-LP CR2E003 (10/03)	
4. FEI Number 20-1957471				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
RICHARDSON, BARRY F 931 STRATFORD PLACE MELBOURNE, FL 32940			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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. \$410,000.00		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 #	NAME		STREET ADDRESS		
NAME	RICHARDSON, BARRY F		CITY-ST- ZIP		
STREET ADDRESS	931 STRATFORD PLACE		CITY-ST- ZIP		
CITY-ST- ZIP	MELBOURNE, FL 32940		CITY-ST- ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	KENDUST, RICK A		CITY-ST- ZIP		
STREET ADDRESS	7630 N. WICKHAM ROAD SUITE 102		CITY-ST- ZIP		
CITY-ST- ZIP	MELBOURNE, FL 32940		CITY-ST- ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	BJERNING, EUGENE K		CITY-ST- ZIP		
STREET ADDRESS	215 BAYTREE DR.		CITY-ST- ZIP		
CITY-ST- ZIP	MELBOURNE, FL 32940		CITY-ST- ZIP		
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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), 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: _____			1-21-05 321-254-9145 <small>Date Daytime Phone #</small>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					

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