

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

DOCUMENT # A04000001864		
1. Entity Name 708 OSCEOLA LIMITED PARTNERSHIP		

FILED

05 FEB 21 PM 3:18

SECRETARY OF STATE
TALLAHASSEE FLORIDA

MJH



Principal Place of Business 708 NORTH OSCEOLA AVENUE CLEARWATER, FL 33767 US	Mailing Address N19 W24130 RIVERWOOD DRIVE SUITE 100 WAUKESHA, WI 53188-1131 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02112005 Chg-LP CR2E003 (10/03) *2/21*

4. FEI Number ☒ Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent NAPLES-LAWDOCK, INC. 1395 PANTHER LANE SUITE 300 NAPLES, FL 34109-7874		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$0.00	10. Amount of Capital Contributions in FLORIDA to date. \$1,485,000
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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 CITY-ST-ZIP	L04000085799 OSCEOLA GP, LLC 240 BAYSIDE DRIVE CLEARWATER, FL 337672503	STREET ADDRESS CITY-ST-ZIP	
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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

Osceola GP, LLC
SIGNATURE: By: *Michael Sweet*, Michael Sweet Secretary *02/15/05* 262-522-8990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #