

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

FILED

2005 MAY -2 AM 10: 21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # A04000002053

1. Entity Name  
MCCLOSKEY-BILLS INDUSTRIAL PARK PARTNERSHIP,  
LTD.



Principal Place of Business  
3950 RCA BOULEVARD, SUITE 5000  
PALM BEACH GARDENS, FL 33410

Mailing Address  
3950 RCA BOULEVARD, SUITE 5000  
PALM BEACH GARDENS, FL 33410

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03212005 Chg-LP CR2E003 (10/03)

4. FEI Number

59-216 1144

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

GARY, JOHN W III, ESQ  
GARY DYTRYCH & RYAN, P.A.  
701 U.S. HIGHWAY ONE, SUITE 402  
NORTH PALM BEACH, FL 33408

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. \$1,000,000.00

10. Amount of Capital Contributions  
in FLORIDA to date. 1,000,000.00

**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 # P99000095667  
NAME JCB GENERAL, INC.  
STREET ADDRESS 3950 RCA BOULEVARD, SUITE 5000  
CITY-ST-ZIP PALM BEACH GARDENS, FL 33410

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #  
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CITY-ST-ZIP

700055188507  
05/24/05 01042 005 \*\*526.25

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 AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

John Bills

Date

Daytime Phone #

4/26/05

561-627-7551

STAPLE CHECK HERE