


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JUN -3 AM 9:16

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|--|---|---------------------|--|--|--|
| DOCUMENT # A04000002093 1. Entity Name VISTAS OF THE OCEAN LIMITED PARTNERSHIP | | | |  | |
| Principal Place of Business 2091 OCEANVIEW DRIVE TIERRA VERDE, FL 33715 | | | Mailing Address 2091 OCEANVIEW DRIVE TIERRA VERDE, FL 33715 | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State | | City & State | | 4. FEI Number 54-2167172 | |
| Zip | | Country | | 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 | |
| GAFFNEY, THOMAS F 2091 OCEANVIEW DRIVE TIERRA VERDE, FL 33715 | | | | 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 <u><i>Thomas F. Gaffney</i></u> 4/18/05 <small>Signature, typed or printed name of registered agent and filer if applicable.</small> | | | | | |
| 9. Capital Contributions as Shown on record. \$10,000,000.00 | | | 10. Amount of Capital Contributions in FLORIDA to date. 0 | | |
| 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 # | L04000094071 | | STREET ADDRESS | | |
| NAME | DEANCO LIMITED LIABILITY COMPANY | | CITY-ST-ZIP | | |
| STREET ADDRESS | 2091 OCEANVIEW DRIVE | | STREET ADDRESS | 300056384963 | |
| CITY-ST-ZIP | TIERRA VERDE, FL 33715 | | CITY-ST-ZIP | 06/21/05--01013--008 **385.00 | |
| DOCUMENT # | | | STREET ADDRESS | 300056384963 | |
| NAME | | | CITY-ST-ZIP | 06/21/05--01013--008 **141.25 | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | |
| DOCUMENT # | | | STREET ADDRESS | | |
| NAME | | | CITY-ST-ZIP | | |
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| CITY-ST-ZIP | | | CITY-ST-ZIP | | |
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| NAME | | | CITY-ST-ZIP | | |
| STREET ADDRESS | | | 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), 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. | | | | | |
| DEANCO - Manager SIGNATURE: <u><i>Thomas F. Gaffney</i></u> | | | SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER THOMAS F. GAFFNEY | | |
| | | | Date 3-5-05 Daytime Phone # 727-866-878 | | |

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