

2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY SEPTEMBER 7, 2005

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

05 SEP -1 AM 9:44

DOCUMENT # A04000002098	
1. Entity Name CLAUDE PERRY HOLDINGS, LTD.	



Principal Place of Business 732 HWY. 98 EAST DETIN FL 32541	Mailing Address 732 HWY. 98 EAST DETIN FL 32541
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2. Principal Place of Business 732 Harbor Blvd Suite, Apt. #, etc.	3. Mailing Address 732 Harbor Blvd Suite, Apt. #, etc.
City & State Destin, Florida	City & State Destin, Florida
Zip 32541	Country OKA/005A

2nd MOORE

CR2E003 (5/05)

6. Name and Address of Current Registered Agent FOSTER, WILLIAM S 909 MAR WALT DRIVE SUITE 1014 FORT WALTON BEACH FL 32547	
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7. Name and Address of New Registered Agent Name: CLAUDE F. PERRY Sr Street Address (P.O. Box Number is Not Acceptable): 732 Harbor Blvd. City: Destin FL 32541	
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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: [Signature] Signature, typed or printed name of registered agent and title if applicable	DATE: 8/4/05
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11. FILE NOW!!! Due by September 7, 2005!
 See Block 11 instructions for fee info. If first notice was not received, check box and do not include \$400 late fee. ☒

9. Capital Contributions as Shown on record. \$99.00	10. Amount of Capital Contributions in FLORIDA to date. 0
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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	P04000172818 CLAUDE PERRY HOLDINGS, INC. 732 HWY. 88 EAST DESTIN FL 32541	STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	300059620943 09/14/05 01037 005 **\$8.75
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	300059620943 09/14/05 01037 006 **\$2.50
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	

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

SIGNATURE:

CLAUDE PERRY HOLDINGS, LTD.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone

8/4/05
 850-865 1063
 837-6376