

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # A05883 1. Entity Name SOUTHSIDE SHOPPING CENTER, LIMITED					
Principal Place of Business 102 W. PINELOCH STREET, STE. 10 ORLANDO, FL 32806			Mailing Address P.O. BOX 568367 ORLANDO, FL 32856-8367		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-6134176	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CARUSO, PHYLIS P 102 W. PINELOCH STREET, STE. 10 ORLANDO, FL 32806				7. Name and Address of New Registered Agent Name Street Address (P O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$527,667.00			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	CARUSO, AUSTIN A. JR.		CITY-ST-ZIP		
STREET ADDRESS	102 W. PINELOCH STREET, STE. 10				
CITY-ST-ZIP	ORLANDO, FL 32806				
DOCUMENT #	NAME		STREET ADDRESS		
NAME	CARUSO, J. PAUL		CITY-ST-ZIP		
STREET ADDRESS	102 W. PINELOCH STREET, STE. 10				
CITY-ST-ZIP	ORLANDO, FL 32806				
DOCUMENT #	NAME		STREET ADDRESS		
NAME	CARUSO, PHYLIS P.		CITY-ST-ZIP		
STREET ADDRESS	102 W. PINELOCH STREET, STE. 10				
CITY-ST-ZIP	ORLANDO, FL 32806				
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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: <i>Phylis P. Caruso</i>			4/14/05		407 859 3552
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date</small>		<small>Daytime Phone #</small>

STABLE CHECK HERE



01042005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-6134176 Applied For Not Applicable

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

7. Name and Address of New Registered Agent
 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.

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DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP		
	CARUSO, PHYLIS P.	102 W. PINELOCH STREET, STE. 10	ORLANDO, FL 32806		
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SIGNATURE: *Phylis P. Caruso* 4/14/05 407 859 3552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #