2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

STAPLE CHECK HERE

SIGNATURE:

1. Entity Nar NUZZO 8	IMENT # A12507 THE SEASOCIATES, LTD.				Secretary of State	V J
1351 SW 41		Mailing Address 1351 SW 4TH COUR BOCA RATON, FL 3:				
2. Principal I	Place of Business	3. Mailing Address	, ,,,			
Suite, Apt		Suite, Apt. #, etc.			03182005 Chg-LP CR2E003 (10/03)	
City & State		City & State			4. FEI Number Applied For 59-2178275 Not Applicab	le
Zip	Country	Zlp	Cour	ntry	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Curre	nt Registered Agent		Name	7. Name and Address of New Registered Agent	_
NUZZO, MARK J. 1351 S.W. 4TH CT. BOCA RATON, FL 33432				Street Address ((P.O. Box Number is Not Acceptable)	_
				City	FL Zip Code	_
the obliga	e named entity submits this statement tions of registered agent.	for the purpose of changing	its register	ed office or register	ered agent, or both, in the State of Florida. I am familiar with, and accep	t
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.			DATE	
9. Cepital Co as Shown	on record. \$2,000.00	10. Amount of Ca in FLORIDA to		butions		
	A GENERAL PARTNER NOTE: General Partners II	THAT IS A BUSINESS I MAY NOT be changed or	ENTITY No the form	IUST BE REGIST 1; an amendmen	STERED AND ACTIVE WITH THIS OFFICE. ont must be filed to change a general partner.	
12.	GENERAL PARTN	ER INFORMATION	13.		ADDRESS CHANGES ONLY	_
DOCUMENT # NAME STREET ADDRESS	P01000039817 NU BUILDINGS, INC. 1351 SW 4TH COURT			EET ADORESS		_
CITY-ST-ZIP	BOCA RATON, FL 33432			'-ST-ZIP		
DOCUMENT # NAME STREET ADDRESS			STR	EET ADDRESS	<u> </u>	
CITY-ST-ZIP			стт	'-ST-ZIP	04/25/05-80009-002 150.00	_
DOCUMENT # NAME		_	STRI	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP		
DOCUMENT # NAME			STRE	TET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	-		CITY	-ST-ZIP		
DOCUMENT # NAME			STRE	ET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			CITY	-ST-ZIP		
DOCUMENT /			STRE	ET ADDRESS		
STREET ADDRESS CITEST-ZIP	_	.	СТҮ	-ST-ZIP		
indicated	pertify that the information supplied w on this report is true and accurate ar yer or trustee empowered to execute	ia mat my signature shall nav	/e trie same	e legal effect as if m	ection 119.07(3)(i), Florida Statutes. I further certify that the information made under oath; that I am a General Partner of the limited partnership of	7.

OF SIGNING GENERAL PARTNER