



2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
May 16, 2005 08:00 AM
Secretary of State

DOCUMENT # A22016 1. Entity Name MOP PARTNERSHIP, LTD.					
Principal Place of Business 191 W. NATIONWIDE BLVD SUITE 200 COLUMBUS, OH 43215			Mailing Address 191 W. NATIONWIDE BLVD SUITE 200 COLUMBUS, OH 43215		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		04262005 Chg-LP CR2E003 (10/03)	
4. FEI Number 31-1203476				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PADUCH, GARY F. 321 OLEANDER WAY CASSELBERRY, FL 32707				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. \$25.00			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	PADUCH, GARY F.		CITY-ST-ZIP		
STREET ADDRESS	321 OLEANDER WAY		CITY-ST-ZIP		
CITY-ST-ZIP	CASSELBERRY, FL 32707		CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	MCCARTHY, KEVIN W.		CITY-ST-ZIP		
STREET ADDRESS	1800 SUNSET DR		CITY-ST-ZIP		
CITY-ST-ZIP	WINTER PARK, FL 32789		CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	J35079		CITY-ST-ZIP		
STREET ADDRESS	GRE SO FLA, INC.		CITY-ST-ZIP		
CITY-ST-ZIP	191 W. NATIONWIDE BLVD		CITY-ST-ZIP		
CITY-ST-ZIP	COLUMBUS, OH 43215		CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
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STREET ADDRESS			CITY-ST-ZIP		
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					
SIGNATURE: 			Frank S. Benson III April 28, 2005 614-228-5331		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date Daytime Phone #</small>		



04262005 Chg-LP CR2E003 (10/03)

4. FEI Number 31-1203476 Applied For Not Applicable

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

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Name

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13. ADDRESS CHANGES ONLY

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 CASSELBERRY, FL 32707

STREET ADDRESS

CITY-ST-ZIP

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 1800 SUNSET DR
 WINTER PARK, FL 32789

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Frank S. Benson III

April 28, 2005

614-228-5331

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Date

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STAPLE CHECK HERE