

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

**Due By May 1, 2005**

FILED

2005 APR 22 AM 11:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # A22259**

1. Entity Name  
**GREEN DADELAND STATION, LTD.**



Principal Place of Business  
**9155 S. DADELAND BLVD., SUITE 1812  
MIAMI, FL 33156**

Mailing Address  
**9155 S. DADELAND BLVD., SUITE 1812  
MIAMI, FL 33156**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04062005 Chg-LP CR2E003 (10/03)

City & State

City & State

4. FEI Number

**59-2652801**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GREEN, ELIZABETH A., ESQ.  
9155 SOUTH DADELAND BLVD.  
SUITE 1812  
MIAMI, FL 33156**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
as Shown on record.

**\$10,000.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

**\$10,000.00**

**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 # **P96000026661**  
NAME **NORTH STATION, INC.**  
STREET ADDRESS **9155 S. DADELAND BLVD., SUITE 1812**  
CITY-ST-ZIP **MIAMI, FL 33156**

STREET ADDRESS  
CITY-ST-ZIP

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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.

By: *North Station, Inc. a Fla. corp., its General Partner*

Ext. 110

SIGNATURE: By: *Elizabeth A. Green*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4-15-05

(305)670-1000

*Elizabeth A. Green, Vice President*

STAPLE CHECK HERE