

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Feb 08, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # A24062**

1. Entity Name  
**DERMER INVESTMENTS COMPANY, LTD.**



Principal Place of Business <b>% BURTON DERMER          1180 S. OCEAN BLVD., #8E          BOCA RATON, FL 33432</b>	Mailing Address <b>% BURTON DERMER          1180 S. OCEAN BLVD., #8E          BOCA RATON, FL 33432</b>
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

01112005 Chg-LP CR2E003 (10/03)

4. FEI Number  
**59-2753124**

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

**6. Name and Address of Current Registered Agent**

**DERMER INVESTMENTS COMPANY, INC.  
 % BURTON DERMER  
 1180 S. OCEAN BLVD., #8E  
 BOCA RATON, FL 33432**

**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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

9. Capital Contributions as Shown on record. **\$1,996,071.60**

10. Amount of Capital Contributions in FLORIDA to date. \_\_\_\_\_

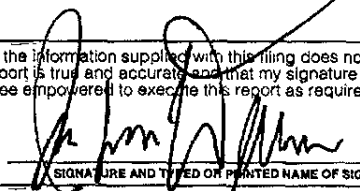
**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # <b>M43538</b>	NAME <b>DERMER INVESTMENTS COMPANY, INC.</b>	STREET ADDRESS	
STREET ADDRESS <b>% 2601 S. BAYSHORE DR., SUITE 1600</b>	CITY-ST-ZIP <b>MIAMI, FL 33133</b>	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	CITY-ST-ZIP	CITY-ST-ZIP	
DOCUMENT #	NAME	STREET ADDRESS	
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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:  **BURTON DERNER** 2/1/05 561 361-0962

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_