

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

**FILED**  
**Mar 01, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # A25443**

1. Entity Name  
**LAKE MARY PARTNERSHIP, LTD.**



Principal Place of Business  
**C/O SHELDON B. MILLER**  
**2875 N.E. 191ST STREET, SUITE 702-A**  
**AVENTURA, FL 33180**

Mailing Address  
**C/O SHELDON B. MILLER**  
**2875 N.E. 191ST STREET, SUITE 702-A**  
**AVENTURA, FL 33180**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02212005

Chg-LP

CR2E003 (10/03)

4. FEI Number

**65-0011053**

Applied For

Not Applicable

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

**MILLER, SHELDON B**  
**2875 N.E. 191ST STREET, SUITE 702-A**  
**AVENTURA, FL 33180**

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.

**\$2,000,000.00**

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 # **M58989**  
 NAME **SBM INVESTMENTS, INC.**  
 STREET ADDRESS **2875 NE 191 ST 702A**  
 CITY-ST-ZIP **N. MIAMI BEACH, FL**

STREET ADDRESS  
 CITY-ST-ZIP

DOCUMENT # **M58988**  
 NAME **LAKE MARY GEN. PARTNER**  
 STREET ADDRESS **3640 YACHT CLUB DRIVE**  
 CITY-ST-ZIP **AVENTURA, FL**

STREET ADDRESS  
 CITY-ST-ZIP

**U00000247735**  
**03/01/05-80036-012 526.25**

DOCUMENT # **M58987**  
 NAME **SEMINOLE LAND RESOURCES**  
 STREET ADDRESS **2164 GENOVA DRIVE**  
 CITY-ST-ZIP **OVIEDO, FL**

STREET ADDRESS  
 CITY-ST-ZIP

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

STREET ADDRESS  
 CITY-ST-ZIP

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

STREET ADDRESS  
 CITY-ST-ZIP

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

STREET ADDRESS  
 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)(f), 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**Sheldon B. Miller**

**2/24/05**

Date

**(305) 931-9975**

Daytime Phone #

STAPLE CHECK HERE