
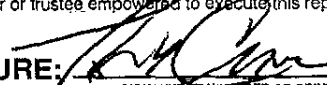


**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005**

**FILED
Apr 30, 2005 08:00 AM
Secretary of State**

DOCUMENT # A25558							
1. Entity Name ALLSTAR BUILDING MATERIALS, LTD.							
Principal Place of Business 1361 NORTH HIGHWAY U.S. 1 ORMOND BEACH, FL 32174			Mailing Address 1361 NORTH HIGHWAY U.S. 1 ORMOND BEACH, FL 32174				
2. Principal Place of Business		3. Mailing Address					
Suite, Apt #, etc.		Suite, Apt #, etc.					
City & State		City & State					
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
SIMS, G. LARRY 501 N. GRANDVIEW AVE. DAYTONA BEACH, FL 32118			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					DATE _____		
9. Capital Contributions as Shown on record. \$681,568.00		10. Amount of Capital Contributions in FLORIDA to date.		\$681,568.00			
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 #	J91869	STREET ADDRESS	1100000345284 04/30/05-80029-017 526.25				
NAME	ALLSTAR BUILDING MATERIALS, INC.	CITY-ST-ZIP					
STREET ADDRESS	1361 NORTH HIGHWAY US 1						
CITY-ST-ZIP	ORMOND BEACH, FL						
DOCUMENT #		STREET ADDRESS					
NAME		CITY-ST-ZIP					
STREET ADDRESS							
CITY-ST-ZIP							
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NAME		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: 			THOMAS Y. CAINE PRESIDENT OF GENERAL PARTNER		Date: (386) 677-6330		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date</small>		<small>Daytime Phone #</small>		



03162005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-2849449 Applied For Not Applicable

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