


**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2005**

**FILED**  
**Mar 23, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A26242</b>	
1. Entity Name <b>SEVILLE PARTNERS OF DAYTONA LIMITED PARTNERSHIP</b>	

Principal Place of Business <b>800 NORTH FERNCREEK AVENUE ORLANDO FL 32803</b>	Mailing Address <b>800 NORTH FERNCREEK AVENUE ORLANDO FL 32803</b>
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



1ST MOORE CR2E003 (10/04)

4. FEI Number <b>41-1617165</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>  <b>LEWIS, ROBERT B., JR. 800 NORTH FERNCREEK AVENUE ORLANDO FL 32803</b>
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<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. **\$800,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

**11. FILE NOW!!! Due by May 1, 2005.**  
**See Block 11 instructions for fee info.**

**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	LEWIS, ROBERT B JR	CITY-ST-ZIP	U000000273862 03/23/05-80044-020 \$26.25
STREET ADDRESS	800 N. FERNCREEK AVE		
CITY-ST-ZIP	ORLANDO FL		
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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:** ROBERT B. LEWIS, JR.  
Robert B. Lewis Jr  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3-14-05 4078973863  
Date Daytime Phone #

STAPLE CHECK HERE