

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

2005 APR 13 AM 9:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A27323					
1. Entity Name RAPAPORT FAMILY LTD. I					
Principal Place of Business 175 BRADLEY PLACE PALM BEACH, FL 33480			Mailing Address 175 BRADLEY PLACE PALM BEACH, FL 33480		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0079982	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RAPAPORT, ROBERT D 175 BRADLEY PLACE PALM BEACH, FL 33480				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. This 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 _____ <small>Signature, typed or printed name of registered agent, and title is applicable</small>					
9. Capital Contributions as Shown on record. \$15,000.00			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 #	P98000011510		STREET ADDRESS		
NAME	RAPAPORT FAMILY CORP.		CITY - ST - ZIP		
STREET ADDRESS	175 BRADLEY PLACE				
CITY - ST - ZIP	PALM BEACH, FL 33480				
DOCUMENT #			STREET ADDRESS		
NAME			CITY - ST - ZIP		
STREET ADDRESS					
CITY - ST - ZIP					
DOCUMENT #			STREET ADDRESS	900054217729	
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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)(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: <u>Robert D. Rapaport</u>			Robert D. Rapaport 3/18/05 (561)659-5311		
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		

STAPLE CHECK HERE