



2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED
Feb 22, 2005 08:00 AM
Secretary of State

DOCUMENT # A27923 1. Entity Name SMITH LAKE SHORES VILLAGE LIMITED PARTNERSHIP					
Principal Place of Business 9701 S.E. HIGHWAY 25 BELLEVUE, FL 48076			Mailing Address 21411 CIVIC CENTER DR., STE. 306 SOUTHFIELD, MI 48076		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01302005 Chg-LP CR2E003 (10/03)	
4. FEI Number 38-2851371				Applied For <input type="checkbox"/> Not Applicable	
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		
BRAVERMAN, ARTHUR 6069 N.W. 23RD AVE BOCA RATON, FL 33496			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$360,000.00		10. Amount of Capital Contributions in FLORIDA to date. * 360,000.			
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 #	G00097900258		STREET ADDRESS		
NAME	RISSMAN INVESTMENT CO.		CITY-ST-ZIP		
STREET ADDRESS	21411 CIVIC CENTER DR., #306				
CITY-ST-ZIP	SOUTHFIELD, MI 48076				
DOCUMENT #	KORMAN, HARRY B		STREET ADDRESS		
NAME	1175 NE 125TH ST. SUITE 306		CITY-ST-ZIP		
STREET ADDRESS	N. MIAMI BEACH, FL				
CITY-ST-ZIP					
DOCUMENT #	BRAVERMAN, ARTHUR		STREET ADDRESS		
NAME	6069 N.W. 23RD AVE		CITY-ST-ZIP		
STREET ADDRESS	BOCA RATON, FL 33496				
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS		
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: 			Date: 2/08/05		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Daytime Phone #		

STAPLE CHECK HERE