2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

## FILED Feb 19, 2005 08:00 AM Secretary of State

	<ol> <li>Entity Nam WILLOW</li> </ol>	DOCUMENT # A29084  1. Entity Name WILLOW LAKE REALTY INVESTMENTS LTD., A FLORIDA LIMITED PARTNERSHIP						Secretary of State		
İ	Principal Place of Business 505 S. FLAGLER DRIVE, SUITE 1330 WEST PALM BEACH, FL 33401				Mailing Address 505 S. FLAGLER DŘÍVĚ, SUITE 1330 WEST PALM BEACH, FL 33401					
İ	2. Principal Place of Business				3. Mailing Address					
	Suite, Apt. #, etc.				Suite, Apt. #, etc.			01192005 Chg-LP	CR2E00	3 (10/03)
	City & State				City & State	· · · · · · · · · · · · · · · · · · ·		4. FE! Number 59-2963815		Applied For Not Applicable
	Zip				Zip	Cou	ntry	5. Certificate of Status Desired	_ U F	8.75 Additional ee Required
	6. Name and Address of Current Registered Agent						Name	7. Name and Address of New	Registered Ag	jent
	FRIEDLAND, KIRK 505 S. FLAGLER DRIVE, SUITE 1330						Street Address (P.O. Box Number is Not Acceptable)		ole)	
	WEST PALM BEACH, FL 33401								·	
i							City		FL	Zip Code
	8. The above the obligat	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.						<del></del>	1	, DATE	
	9. Capital Contributions as Shown on record. \$270,000.00 In FLORIDA to date. \$270,000.00									
	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.			HANGES ONLY	
	DOCUMENT # NAME STREET ADDRESS	NAME WILLOW LAKE REALTY INVEST				1330			173544B	
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	NAME STREET ADDRESS						EET ADDRESS		<u> </u>	
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	14. I hereby certify that the information supplied with this filling 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 the receiver or trustee empowered in the proof as required by Chapter 620, Florida Statutes  SIGNATURE:									
{	SIGNATURE:  SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING GENERAL PARTNER  Date  Dayting Pricing #									
			MASK	STOPP,	Vica Pr	esida	NT OF W	:11ow Lake		