

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
May 05, 2005 08:00 AM
Secretary of State

DOCUMENT # A31082 1. Entity Name STUART PROPERTY HOLDINGS, LTD.					
Principal Place of Business 450 E. LAS OLAS BLVD., 15TH FLOOR FT. LAUDERDALE, FL 33301			Mailing Address 450 E. LAS OLAS BLVD., 15TH FLOOR FT. LAUDERDALE, FL 33301		
2. Principal Place of Business Suite, Apt #, etc		3. Mailing Address Suite, Apt #, etc			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0244706	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent HUIZENGA HOLDINGS, INC 450 E. LAS OLAS BLVD., 15TH FLOOR FT. LAUDERDALE, FL 33301				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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				FL Zip Code	
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>					
9. Capital Contributions as Shown on record. \$8,000,000.00			10. Amount of Capital Contributions in FLORIDA to date. 8,000,000.00		
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. ADDRESS CHANGES ONLY		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	S24580 STUART PROPERTY MGMT, INC 450 E. LAS OLAS BLVD., 15TH FLOOR FT. LAUDERDALE, FL 33301		STREET ADDRESS CITY-ST-ZIP	11000000362449 05/05/05-80116-020 526.25	
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					



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