


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

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

DOCUMENT # A31091			
1. Entity Name BCK VENTURES-1991, LTD.			
Principal Place of Business 1900 SUMMIT TOWER BLVD., SUITE 130 ORLANDO FL 32810		Mailing Address 1900 SUMMIT TOWER BLVD., SUITE 130 ORLANDO FL 32810	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



1ST MOORE CR2E003 (10/04)

4. FEI Number 59-3044897		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 KATZEN, MARC 1900 SUMMIT TOWER BLVD., SUITE 130 ORLANDO FL 32810		7. Name and Address of New Registered Agent 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		11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.	
SIGNATURE _____ <small>Signature typed or printed name of registered agent and title if applicable</small>		DATE _____	
9. Capital Contributions as Shown on record \$340,000.00	10. Amount of Capital Contributions in FLORIDA to date. 314,797.00		

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 # P35531	NAME BCK ACQUISITION, LTD.	STREET ADDRESS	
STREET ADDRESS 1900 SUMMIT TOWER BLVD., SUITE 130		CITY- ST- ZIP	
CITY- ST- ZIP ORLANDO FL 32810		STREET ADDRESS	
		CITY- ST- ZIP	1100000220012 02/08/05-80050-017 526.25
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		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:  **01/20/05**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
Date Daytime Phone #

STAPLE CHECK HERE