2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

STAPLE CHECK HERE

FILED

2005 APR 25 PM 12: 21

4-20-05 Date

DOCUMENT # A31116 1. Entity Name STEPHEN M. GOLDING COMPANY LIMITED PARTNERSHIP Principal Place of Business 1000 NW 65TH-\$I. SUITE 200 FT. LAUDERDALE, FL 33309 2. Principal Place of Business 2950 W. CYPRESS CREEK ROAD 2950 W. CYPRESS CREEK Suite, Apt. #, etc. Suite, Apt. #, etc.		309-1708		2005 APR 25 PM 12: 21 SECRETARY OF STATE TALLAHASSEE, FLORIDA			
SUITE 102 SUITE 102			04142005	Chg-LP	CR2E00	3 (10/03)	
City & State FT. LAUDERDALE, FL	E, FL City & State E, FL FT. LAUDERDALE. FL		4. FEI Number 65-0242			Applied For Not Applicable	
Zip Country	Zip (Country	5. Certificate of Status Desired S8.75 Additional		8.75 Additional		
33309 USA 6. Name and Address of Current	33309 Registered Agent	USA	<u> </u>	Address of New Re	F6	ee Required	
	registerou Agein	Name	7, Banto and	Addiesa or reserve	Misterer	<u>jent</u>	
GOLDING, STEPHEN M 1000 NW 65TH ST. Street Addres			(P.O. Box Numbe	r is Not Acceptable)		
S UITE 200		2950 W. CYPRESS CREEK ROAD					
FT. LAUDERDALE, FL 33309		SUITE 10	102				
		City FT LAUI	DERDALE		FL	Zip Code 33309	
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. I SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable.							
9. Capital Contributions as Shown on record. \$100.00 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 # G37656 NAME DEENA GOLDING, PA STREET ADDRESS 2950 W. CYPRESS CREEK ROAD, STE. 102 CITY-ST-ZIP FT. LAUDERDALE, FL 333091708		STREET ADDRESS					
		C:TY-ST-ZIP					
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14. I hereby certify that the information supplied with indicated on this report is true and accurate and the receiver or trustee employered to execute this.	this filing does not qualify for the that the signature shall have the s	exemption stated in Sesame legal effect as if a	ection 119.07(3)(i), made under oath; t	, Florida Statutes. I I that I am a General	further certify Partner of th	that the information e limited partnership or	

ED NAME OF SIGNING GENERAL PARTNER

GOZDING