2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED May 11, 2005 08:00 AM Secretary of State

DOCUMENT # A31623 1. Entity Name PICERNE CORAL KEY LIMITED PARTNERSHIP					Sec	retary of State
Principal Place of Business 247 N WESTMONTE DR ALTAMONTE SPRINGS, FL 32714		Mailing Address 247 N WESTMONTE DR ALTAMONTE SPRINGS, FL 32714				
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	02152005 Chg-LP	CR2E003 (10/03)
City & State		City & State			4. FEI Number 59-3071052	Applied For Not Applicable
Zip	Country	Zip	Cour	ntry	5. Certificate of Status Desired	\$8.75 Additional Fee Required
6.	Name and Address of Curre	nt Registered Agent	``	Name	7. Name and Address of New R	egistered Agent
FILDES, RICHARD J ESQUIRE 215 NORTH EOLA DRIVE ORLANDO, FL 32801				Street Address (P.O. Box Number is Not Acceptable)		
ORDANDO, FL	32001			City		FL Zip Code
8. The above name the obligations of	d entity submits this statement registered agent	for the purpose of changing	îts register	led office or register	red agent, or both, in the State of Flo	
CIONATI IDE	_			····	······································	DATE
9. Capital Contribut as Shown on rec	e, typed or printed name of registered agains	10. Amount of Ca in FLORIDA to		ibutions		DATE
	A GENERAL PARTNER	R THAT IS A BUSINESS	ENTITY M	AUST BE REGIS	TERED AND ACTIVE WITH TH	IS OFFICE.
12.	GENERAL PARTI	NER INFORMATION	13.		ADDRESS CHA	
	PICERNE CORAL DEV. CORP.			HEET ADDRESS		
	,		Cin	Y-ST-ZIP		
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indicated on the the receiver or	that the information supplied to strength is true and accurate a trustee_empowered to execute CORAL DEVELOPME	and that my signature shall ha this_report as required by Ci	ave the sam hapter 620,	ne legal effect as if i , Florida Statutes		I further certify that the information al Partner of the limited partnership or
SIGNATUR	E: BY:	O OR PRINTED NAME OF SIGNING GE	- HEFU	wiren Tre	- Mu 4/24/07	Daytene Prone #

ROBERT M. PICERNE, PRESIDENT