


# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

## Due By May 1, 2005

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 MAR -8 AM 8:25

|  |                                   |   |  |  |  |
|--|-----------------------------------|---|--|--|--|
| <b>DOCUMENT # A31828</b>   |                                   |   |  |         |  |
| 1. Entity Name<br>PRITCHETT DEVELOPMENT COMPANY, LTD.  |                                   |   |  |  |  |
| Principal Place of Business<br>6601 BAYSHORE ROAD<br>NORTH FT. MYERS, FL 33917   |                                   |   | Mailing Address<br>6601 BAYSHORE ROAD<br>NORTH FT. MYERS, FL 33917 |  |  |
| 2. Principal Place of Business   |                                   | 3. Mailing Address  |  |  |  |
| Suite, Apt. #, etc.  |                                   | Suite, Apt. #, etc.   |  |  |  |
| City & State   |                                   | City & State  |  | 4. FEI Number<br>65-0320803  |  |
| Zip  | Country                           | Zip   | Country  | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |  |
| 6. Name and Address of Current Registered Agent  |                                   |   |  | 7. Name and Address of New Registered Agent  |  |
| PRITCHETT DEVELOPMENT CORPORATION<br>6601 BAYSHORE ROAD<br>NORTH FT. MYERS, FL 33917   |                                   |   |  | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>FL Zip Code        |  |
| 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 _____ DATE _____<br><small>Signature, typed or printed name of registered agent and title if applicable.</small>   |                                   |   |  |  |  |
| 9. Capital Contributions as Shown on record. \$5,606,206.35  |                                   | 10. Amount of Capital Contributions in FLORIDA to date. <u>\$5,606,206.35</u> |  |  |  |
| A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.<br>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 #   | L13939                            |   | STREET ADDRESS   |  |  |
| NAME   | PRITCHETT DEVELOPMENT CORPORATION |   | CITY-ST-ZIP  |  |  |
| STREET ADDRESS   | 6601 BAYSHORE ROAD                |   |  |  |  |
| CITY-ST-ZIP  | NORTH FT. MYERS, FL               |   |  |  |  |
| DOCUMENT #   |                                   |   | STREET ADDRESS   | 400048398544   |  |
| NAME   |                                   |   | CITY-ST-ZIP  | 03/15/05--01006--002 **526.25  |  |
| STREET ADDRESS   |                                   |   |  |  |  |
| CITY-ST-ZIP  |                                   |   |  |  |  |
| DOCUMENT #   |                                   |   | STREET ADDRESS   |  |  |
| NAME   |                                   |   | CITY-ST-ZIP  |  |  |
| STREET ADDRESS   |                                   |   |  |  |  |
| CITY-ST-ZIP  |                                   |   |  |  |  |
| DOCUMENT #   |                                   |   | STREET ADDRESS   |  |  |
| NAME   |                                   |   | CITY-ST-ZIP  |  |  |
| STREET ADDRESS   |                                   |   |  |  |  |
| CITY-ST-ZIP  |                                   |   |  |  |  |
| DOCUMENT #   |                                   |   | STREET ADDRESS   |  |  |
| NAME   |                                   |   | CITY-ST-ZIP  |  |  |
| STREET ADDRESS   |                                   |   |  |  |  |
| CITY-ST-ZIP  |                                   |   |  |  |  |
| DOCUMENT #   |                                   |   | STREET ADDRESS   |  |  |
| NAME   |                                   |   | CITY-ST-ZIP  |  |  |
| STREET ADDRESS   |                                   |   |  |  |  |
| 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)(4), 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: <u>Richard H. Pritchett, III</u>  |                                   | Date: <u>3/2/05</u>   |  | Daytime Phone #: <u>239-543-3434</u>   |  |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>  |                                   |   |  |  |  |

STAPLE CHECK HERE