

**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005**

**FILED
May 06, 2005 08:00 AM
Secretary of State**

DOCUMENT # A33517

1. Entity Name
AIRPORT PLAZA PARTNERS, LTD.



Principal Place of Business
5728 MAJOR BLVD.
SUITE 601
ORLANDO, FL 32819

Mailing Address
5728 MAJOR BLVD.
SUITE 601
ORLANDO, FL 32819



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

02162005 Chg-LP CR2E003 (10/03)

4. FEI Number
59-3149169

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
KHATIB, RASHID A.
5728 MAJOR BLVD.
SUITE 601
ORLANDO, FL 32819

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City 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 _____
Signature, typed or printed name of registered agent and title if applicable

9. Capital Contributions as Shown on record. \$1,544,600.00

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

DOCUMENT # V19919
NAME INTRAM INVESTMENTS, INC.
STREET ADDRESS 5728 MAJOR BLVD.
CITY - ST - ZIP ORLANDO, FL 32819

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS
CITY - ST - ZIP

U00000363540
05/06/05 090803 010 526.25

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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)(f), 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: _____ DATE: 4/27/05 DAYTIME PHONE #: (407) 354-2200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE