2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT # A93000000496 06 FEB 14 AM11: 16 OSCÉOLA-192 INVESTORS, LTD. Principal Place of Business Mailing Address 10933 84TH PLACE NE 10933 84TH PLACE NE KIRKLAND, WA 98034 KIRKLAND, WA 98034 2. Principal Place of Business 3. Mailing Address 204 E. 17th Street Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-LP 02022006 CR2E003 (11/05) Suite 202 City & State City & State 4. FEI Number Applied For 59-3182709 Costa Mesa, CA Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 92627 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LAW OFFICES DECUBELLIS & MEEKS P.A. Street Address (P.O. Box Number is Not Acceptable) 837 NORTH GARLAND AVENUE ORLANDO, FL 32801 City Zip Code FI 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 Signature, typeid or printed name of registered agent and title if applicable DATE FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12. 13. DOCUMENT # M99000000741 STREET ADDRESS 10933 84th Place NE NAME RSJ HOLDINGS, LLC STREET ADDRESS 742 1ST STREET SOUTH CITY ST-ZIP Kirkland, WA 98034 CITY+ST-ZIP KIRKLAND, WA 98033 DOCUMENT # STREET ADDRESS <u>500066795139</u> 02/28/06--01016--013 **5 NAME STREET ADDRESS CITY-ST ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-SI-ZIP CITY - SK - ZIP DOCUMENT # STREET ADDRESS NAME 🍃 -STREET ADDRESS CITY ST-ZIP CITY - ST - ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 744-2669 2-2-06 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER