2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2005

Apr 27, 2005 08:00 AM Secretary of State DOCUMENT # A93000000707 1. Entity Name SUTTE PARTNERSHIP, LTD. Principal Place of Business Mailing Address 2433 LEE ROAD 2433 LEE ROAD WINTER PARK FL 32789 WINTER PARK FL 32789 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1ST MOORE CR2E003 {10/04} City & State City & State 4. FEI Number Applied For 59-3187824 Not Applicab Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SUTTE, ROBERT S Street Address (P.O. Box Number is Not Acceptable) 2433 LEE ROAD WINTER PARK FL 32789 City Zip Code FL 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. 11. FILE NOW!!! Due by May 1, 2005. SIGNATURE Signature, typed or printed name of registered agent and title if applicable See Block 11 instructions for fee info. DATE 9. Capital Contributions 10. Amount of Capital Contributions \$431,899.00 as Shown on record in FLORIDA to date \$431,899.00 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 12. ADDRESS CHANGES ONLY OCCUMENT # JUNEAU ADDRESS SUTTE, ROBERT S NAME STREET ADDRESS 2433 LEE ROAD 0177-ST-202 CITY-SI-73P WINTER PARK FL 32789 DOCKIMENT 4 STREET ADDRESS NAME SULLIVAN, ROBERT W JR STREET ADDRESS 484 PLEASANT STREET CHY-S1-28 CMY-ST-JIP **BROCKTON MA 02403** OOCHMENT # U00000336005 STREET ADDRESS NAME <u>04/27/05-80108-012 526 25</u> STREET ADDRESS CITY-ST-75P 000:51-76 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7i2 CITY ST- LIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CHY-SI-ZIP CHY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS DBY-ST-ZIP CITY-ST-ZIP

FILED

SIGNATURE: Robert S. Sutte 4/15/2005 407-628-0505

SIGNATURE: Robert S. Sutte 4/15/2005 407-628-0505

Daily Daily Phone *

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 partners in the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

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