
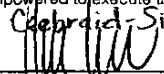


**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 7, 2005**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAY 10 AM 10: 08

DOCUMENT # A9400000381					
1. Entity Name CSC VILLAGE CLUB APARTMENTS, LTD.					
Principal Place of Business 250 AUSTRALIAN AVE. S., 10TH FL, STE. 1003 WEST PALM BEACH, FL 33401		Mailing Address 250 AUSTRALIAN AVE. S., 10TH FL, STE. 1003 WEST PALM BEACH, FL 33401			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		5052005 Chg-LP CR2E003 (10/03)	
4. FEI Number 11-3194846		Applied For Not Applicable			
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		
CEEBRAID-SIGNAL YUFF CORPORATION 250 AUSTRALIAN AVE. S., 10TH FL, STE. 1003 WEST PALM BEACH, FL 33401			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$20,000.00		10. Amount of Capital Contributions in FLORIDA to date.		In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.	
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			13. ADDRESS CHANGES ONLY		
DOCUMENT #	P94000008234		STREET ADDRESS		
NAME	CEEBRAID-SIGNAL YUFF CORPORATION		CITY-ST-ZIP		
STREET ADDRESS	250 AUSTRALIAN AVE. S., 10TH FL, STE. 1003				
CITY-ST-ZIP	WEST PALM BEACH, FL 33401				
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS	700055984567	
NAME			CITY-ST-ZIP	06/09/05--01074--002 **228.75	
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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)(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 partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE: <u>Ceebraid-Signal Yuff Corp.</u>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					
				Date	
				Daytime Phone #	
Jason Schlesinger, Director					