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

FILED 06/03/05
05 JUN -3 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A94000000651

1. Entity Name

THE BAR Y COMPANY, LTD.

Principal Place of Business	Mailing Address
% ANTHONY A. JONES 34 CURTIS STREET SCITUATE MA 02066	% ANTHONY A. JONES 34 CURTIS STREET SCITUATE MA 02066

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc	
City & State		City & State	
Zip	Country	Zip	Country

1ST MOORE CR2E003 (10/04)

4. FEI Number 65-0488708 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CROCKER, DANVENPORT B ESQUIRE 16878 BAY STREET JUPITER FL 33477	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

11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.

9. Capital Contributions as Shown on record. $100,100.00

10. Amount of Capital Contributions in FLORIDA to date. 10,000

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 #	P94000019673	STREET ADDRESS	
NAME	DAIRY HILL, INC.		
STREET ADDRESS	34 CURTIS STREET	CITY-ST-ZIP	
CITY-ST-ZIP	SCITUATE MA 02066		
DOCUMENT #		STREET ADDRESS	
NAME			
STREET ADDRESS		CITY-ST-ZIP	000055982220 06/09/05--01065--014 **158.75
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STAPLE CHECK HERE

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.

for the General Partner

SIGNATURE: Anthony A. Jones 15 April 2005 781-545-9234
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #