2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED Jan 21, 2005 08:00 AM Secretary of State

	DOCUMENT # A9400000853 1. Entity Name THE TAPLIN COMPANY, LTD.				Secretary of State	
	Principal Place of Business 1177 KANE CONCOURSE, SUITE 201 BAY HARBOR, FL 33154 Mailing Address 1177 KANE CONCOURSE, SUITE 201 BAY HARBOR, FL 33154			201	1 (8878) 1 1878 (81) 81871 88771 88711 887	II BBIN BBIN BBIBI IKNII BNYB IINBII BI IYBI
	Principal Place of Business 3. Mailing Address					
	Suite, Apt. #, etc. Suite, Apt. #, etc.				01052005 Chg-LP	CR2E003 (10/03)
to the second se	City & State	City & State	City & State		4. FEI Number 65-0504915	Applied For Not Applicable
	Zip Country	Zip	Count	ry	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Registered Agent			Name	7. Name and Address of New R	legistered Agent
	TAPLIN, MARTIN W		-	Street Address (P.O. Box Number is Not Acceptable)		
	% THE TAPLIN CORPORATION 1177 KANE CONCOURSE, SUITE 201			Street Address (P.O. Box Number is Not Addeptable)		
	BAY HARBOR, FL 33154					
				Cily		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 Signature, typed or printed name of registered againt and little if applicable				, , , , , , , , , , , , , , , , , , ,	DATE
	9. Capital Contributions 5435,600.00 as Shown on record. 5435,600.00 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 ame 12. GENERAL PARTNER INFORMATION 13.			an amendmen	t must be filed to change a go ADDRESS CHA	
STAPLE CHECK HERE	DOCUMENT # P94000046917 NAME THE TAPLIN CORPORATION		STREE	ET ADDRESS		
	STREET ADDRESS 1177 KANE CONCOURSE, S	ADDRESS 1177 KANE CONCOURSE, SUITE 201		ST-ZIP		
	DOCUMENT # NAME		STREE	T ADDRESS	U00000	0187469 -80014-006 535.00
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	DOCUMENT # NAME		STREE	T ADDRESS		
	STREET ADDRESS CITY-SI-ZIP			ST-ZIP		
	14. I hereby certify that the information supplied with his filing does not currify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the Information inclicated 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 of the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
	SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTY.				1/12/2005	Daytime Phone #
		ON WATER		1	- 4D806	ынуст е гоонд е