




**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Feb 09, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A94000001802</b> 1. Entity Name <b>CHAMPION FAMILY PARTNERSHIP, LTD.</b>					
Principal Place of Business <b>1804 MICCOSUKEE COMMONS, #204</b> <b>TALLAHASSEE, FL 32308</b>			Mailing Address <b>1804 MICCOSUKEE COMMONS, #204</b> <b>TALLAHASSEE, FL 32308</b>		
2. Principal Place of Business Suite, Apt #, etc.		3. Mailing Address Suite, Apt #, etc.			
City & State		City & State		02012005    Chg-LP    CR2E003 (10/03)	
Zip    Country		Zip    Country		4. FEI Number <b>59-3295239</b>	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>CHAMPION, JOHN E JR</b> <b>1804 MICCOSUKEE COMMONS, #204</b> <b>TALLAHASSEE, FL 32308</b>			7. Name and Address of New Registered Agent Name Street Address (P O. Box Number is Not Acceptable) City <b>FL</b> 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. <b>\$4,362,988.90</b>		10. Amount of Capital Contributions in FLORIDA to date <b>\$4,362,988.90</b>		<b>\$526.25</b>	
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # <b>P94000092519</b> NAME <b>CHAMPION FAMILY CORPORATION, INC.</b> STREET ADDRESS <b>1804 MICCOSUKEE COMMONS, #204</b> CITY-ST-ZIP <b>TALLAHASSEE, FL 32308</b>			STREET ADDRESS CITY-ST-ZIP		
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.					
<b>SIGNATURE:</b>  <b>John E. Champion, Jr.</b> <b>2/1/05</b> <b>850-992-9915</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER    Date    Daytime Phone #</small>					

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