

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

## Due By September 7, 2005

**DOCUMENT # A95000001935**

1. Entity Name  
DIFABRIZIO FAMILY ENTERPRISES, LTD.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 JUL -7 AM 9:45

Principal Place of Business  
4921 RIVER SHORE DRIVE  
TAMPA, FL 33603

Mailing Address  
4921 RIVER SHORE DRIVE  
TAMPA, FL 33603

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

06302005

Chg-LP

CR2E003 (10/03)

City & State

City & State

4. FEI Number

59-3350136

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DIFABRIZIO, ERNEST  
4921 RIVER SHORE DRIVE  
TAMPA, FL 33603

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
as Shown on record.

\$10,000,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

4,211,797

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 #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DIFABRIZIO, ERNEST  
4921 RIVER SHORE DRIVE  
TAMPA, FL 33603

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DIFABRIZIO, LOLA M  
4921 RIVER SHORE DRIVE  
TAMPA, FL 33603

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DIFABRIZIO, GERALD E  
4921 RIVER SHORE DR.  
TAMPA, FL 33603

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DIFABRIZIO, CAROLYN ANN  
4921 RIVER SHORE DR.  
TAMPA, FL 33603

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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: ERNEST DIFABRIZIO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

7/5/05

(813) 877-5386

Date

Daytime Phone #