2005 LIMITED PARTNERSHIP ANNUAL REPORT

n n n n n n n n n n n n n n n n n n n	lied For Applicable
2. Principal Place of Business 7900 Glades Rd.  Suite, Apt. #, etc. Suite #600  City & State Boca Raton, FL 33434  Zip Country 33434  Palm Beach 6. Name and Address of Current Registered Agent  TOPPEL, JONATHAN 7900 GLADES RD., STE. 420 BOCA RATON, FL 33434  3. Mailing Address 7900 Glades Rd. Suite, Apt. #, etc. Suite, Apt.	lied For Applicable
7900 Glades Rd.  Suite, Apt. #, etc.  Suite #600  City & State Boca Raton, FL 33434  Zip 33434  Palm Beach  6. Name and Address of Current Registered Agent  TOPPEL, JONATHAN 7900 GLADES RD., STE. 420  BOCA RATON, FL 33434  7900 Glades Rd.  Suite, Apt. #, etc. Suite	Applicable
Suite #600         Suite #600         617/2005         Chg-LP         CH2E003 (10/03)           City & State Boca Raton, FL 33434         City & State Boca Raton, FL 33434         4. FEI Number 65-0253593         Apr. Not           Zip 3434         Country Palm Beach Palm Beach Palm Beach 6. Name and Address of Current Registered Agent         5. Certificate of Status Desired Fee Required Fee Required Fee Required Name           TOPPEL, JONATHAN 7900 GLADES RD., STE. 420 BOCA RATON, FL 33434         Street Address (P.O. Box Number is Not Acceptable)	Applicable
Boca Raton, FL 33434  Boca Raton, FL 33434  Country  Sip  Country  Palm Beach  Social Registered Agent  TOPPEL, JONATHAN  7900 GLADES RD., STE. 420  BOCA RATON, FL 33434  Boca Raton, FL 33434  Boca Raton, FL 33434  Boca Raton, FL 33434  Country  Palm Beach  Fee Required  Tourier Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)	Applicable
33434 Palm Beach 33434 Palm Beach 5. Certificate of Status Desired Fee Required  6. Name and Address of Current Registered Agent Name  TOPPEL, JONATHAN 7900 GLADES RD., STE. 420 BOCA RATON, FL 33434	
TOPPEL, JONATHAN 7900 GLADES RD., STE. 420 BOCA RATON, FL 33434  Name  Street Address (P.O. Box Number is Not Acceptable)	onai
7900 GLADES RD., STE. 420  BOCA RATON, FL 33434  Street Address (P.O. Box Number is Not Acceptable)	
· ·	
City _	
8. The above named entity submits its statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida / I am familiar with, a the obligations of registered agent.	nd accept
SIGNATURE Squature, lyped or printed name of registered agent and little if applicable.  Jonathan Toppel  Oute	
9. Capital Contributions as Shown on record. \$3,000,000.00 In FLORIDA to date. \$000,000,00	
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 / S51867  NAME TOPP-HILL FARMS, INC.  STREET ADDRESS  7900 Glades Rd. #600	
STREET ADDRESS 7900 GLADES ROAD, SUITE 420 CITY-ST-ZIP BOCA RATON, FL 33434  CITY-ST-ZIP BOCA RATON, FL 33434	
DOCUMENT #  NAME  STREET ADDRESS	
STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP	
DOCUMENT / STREET ADDRESS NAME	
STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP	
00CUMENT / NAME STREET ADDRESS 800054744268	-25
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT 4	
NAME STREET ADDRESS	
DOCUMENT / STREET ADDRESS NAME:	
STREET ADDRESS CITY-ST-ZIP 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 in 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 partner or trustee empowered to execute this report as required by Chapter 620, Florida Statutes	
SIGNATURE: Harold Toppel   1/2/05 50-451-451-446	ormation rtnership or