2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED Feb 08, 2005 08:00 AM **DOCUMENT # A95000002061 Secretary of State** BRIAN'S PLACE DEVELOPMENT, LTD. Principal Place of Business Mailing Address 6650 W. INDIANTOWN RD., STE. #200 6650 W. INDIANTOWN RD., STE. #200 JUPITER, FL 33458 JUPITER FL 33458 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01062005 CR2E003 (10/03) Chg-LP 4. FEI Number Applied For City & State City & State 65-0647287 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SCOTT KRAMER, ESQUIRE Street Address (P.O. Box Number is Not Acceptable) 6650 W. INDIANTOWN RD., STE. #200 JUPITER, FL 33458 City 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 Squature, typed or private name of regressed agent and like it applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions \$495,000,00 in FLORIDA to date. as Shown on record. 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. P98000069875 DOCUMENT# STREET ADDRESS 6650 GENERAL, INC. MAKE STREET ADDRESS 6650 WEST INDIANTOWN ROAD, #200 C/1Y-51-ZP CATY-ST-ZP JUPITER, FL. 33458 DOCUMENT# STREET ADDRESS NAME <u> 1160000220044</u> STREET ADDRESS 02/08/05-80052-024 526.25 CHY-SI-ZP CITY-ST-ZP DOCUMENT A STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-SI-ZP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-51-7P 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 regarded by Chapter 620, Florida Statutes

CITY-ST-ZIP

STREET ADDRESS

SIGNATURE:

DOCUMENT #

CDY-ST-ZP

STREET ADDRESS

resident 6650 General IN. 1/10/85