


**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2005**

DOCUMENT # A96000000041 1. Entity Name GRADY STANFORD MAULDIN, JR. AND JOAN LEE MAULDIN FAMILY LIMITED PARTNERSHIP	
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR -9 AM 9:30

Principal Place of Business 97009 3501 BLACKBEARD WAY YULEE FL 32097	Mailing Address 3501 BLACKBEARD WAY YULEE FL 32097
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

 1ST MOORE CR2E003 (10/04)	
4. FEI Number 65-0643318	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	
97009 MAULDIN, GRADY S JR 3501 BLACKBEARD WAY YULEE FL 32097	

7. Name and Address of New Registered Agent	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	
9. Capital Contributions as Shown on record. \$710,500.00	10. Amount of Capital Contributions in FLORIDA to date.

11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.
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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	
DOCUMENT #	NAME
NAME	STREET ADDRESS
CITY-ST-ZIP	
DOCUMENT #	NAME
NAME	STREET ADDRESS
CITY-ST-ZIP	
DOCUMENT #	NAME
NAME	STREET ADDRESS
CITY-ST-ZIP	
DOCUMENT #	NAME
NAME	STREET ADDRESS
CITY-ST-ZIP	
DOCUMENT #	NAME
NAME	STREET ADDRESS
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	97009 Blackbeards way
CITY-ST-ZIP	yulee FL 32097
STREET ADDRESS	97009 Blackbeards way
CITY-ST-ZIP	yulee FL 32097
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	900048499329
CITY-ST-ZIP	03/16/05--01011--001 **526.25
STREET ADDRESS	
CITY-ST-ZIP	
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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	Date	Daytime Phone #
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STAPLE CHECK HERE