


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

**FILED**  
**May 05, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A96000000083</b>		
1. Entity Name <b>SHILOH FAMILY, LTD.</b>		

Principal Place of Business <b>5775 WEST HALLANDALE BEACH BLVD. HOLLYWOOD FL 33023</b>	Mailing Address <b>5775 WEST HALLANDALE BEACH BLVD. HOLLYWOOD FL 33023</b>
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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 <b>65-0625504</b>		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required
6. Name and Address of Current Registered Agent  <b>COHN, ALAN B C/O ABRAMS, ANTON, ROBBINS, RESNICK 2021 TYLER ST. HOLLYWOOD FL 33022</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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**11. FILE NOW!!! Due by May 1, 2005.**  
**See Block 11 instructions for fee info.**

9. Capital Contributions as Shown on record. <b>\$500,000.00</b>	10. Amount of Capital Contributions in FLORIDA to date. <b>500,000.00</b>
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	<b>STANTON, RICHARD</b>	CITY - ST - ZIP	
CITY - ST - ZIP	<b>5775 WEST HALLANDALE BEACH BLVD. HOLLYWOOD FL 33023</b>		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	<b>STANTON, LINDA</b>	CITY - ST - ZIP	
CITY - ST - ZIP	<b>5775 WEST HALLANDALE BEACH BLVD. HOLLYWOOD FL 33023</b>		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS		CITY - ST - ZIP	
CITY - ST - ZIP			
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STREET ADDRESS		CITY - ST - ZIP	
CITY - ST - ZIP			

**100000362303**  
**05/05/05-80112-005 526.25**

STAPLE CHECK HERE

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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

**SIGNATURE:**  **RICHARD STANTON** **4/21/05 954-894-2999**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #