


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

DOCUMENT # A96000000703		
1. Entity Name SCHWERER FAMILY PARTNERS, LTD.		

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 05 FEB -2 AM 11:13

Principal Place of Business 706 S. 6TH STREET FORT PIERCE FL 34950	Mailing Address P. O. BOX 4491 FT. PIERCE FL 34948
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2. Principal Place of Business 4634 S. 25 <sup>TH</sup> ST	3. Mailing Address 4634 S. 25 <sup>TH</sup> ST
Suite, Apt. #, etc.	Suite, Apt. #, etc.



1ST MOORE CR2E003 (10/04)

City & State FT PIERCE FL	City & State FT PIERCE FL
Zip 34981	Zip 34981
Country US	Country US

4. FEI Number 65-0659103	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  SCHWERER, JOHN A 706 S. 6TH STREET FORT PIERCE FL 34950
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7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City FL Zip Code
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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 _____
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9. Capital Contributions as Shown on record. \$500,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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11. FILE NOW!!! Due by May 1, 2005  
 See Block 11 instructions for fee info.

**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 #	SCHWERER, JOHN A
NAME	706 S. 6TH STREET
STREET ADDRESS	FORT PIERCE FL 34950
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDRESS CHANGES ONLY	
STREET ADDRESS	4634 S. 25 <sup>TH</sup> ST
CITY-ST-ZIP	FT PIERCE FL 34981
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	
STREET ADDRESS	
CITY-ST-ZIP	

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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)(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: 	1/31/05	772 461-7323
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	Date	Daytime Phone #