

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

DOCUMENT # A96000000814

1. Entity Name
SEA OATS LIMITED, L.L.P.



FILED
2005 APR 11 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**2539 SOUTH ATLANTIC AVENUE
DAYTONA BEACH SHORES, FL 32118**

Mailing Address
**2539 SOUTH ATLANTIC AVENUE
DAYTONA BEACH SHORES, FL 32118**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country



02142005 Chg-LP CR2E003 (10/03)

4. FEI Number
59-3376572

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVENUE
DAYTONA BEACH, FL 32115-2491**

7. Name and Address of New Registered Agent
Name **Jos Roquidice**
Street Address (P.O. Box Number is Not Acceptable) **1515 Ridge wood Ave**
City **HH** **FL** Zip Code **32117**

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

9. Capital Contributions as Shown on record. **\$192,000.00**

10. Amount of Capital Contributions in FLORIDA to date.

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 #	P96000029405	STREET ADDRESS	
NAME	SEA OATS, INC.	CITY-ST-ZIP	
STREET ADDRESS	2539 SOUTH ATLANTIC AVENUE		
CITY-ST-ZIP	DAYTONA BEACH SHORES, FL 32118		
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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: **Philip A. Elliott Jr.** 02-28-05 386-767-5684

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE