

**FILED**  
**Jan 11, 2006 08:00 AM**  
**Secretary of State**

Principal Place of Business	Mailing Address
9095 BAYWOOD PARK DRIVE SEMINOLE, FL 33777	9095 BAYWOOD PARK DRIVE SEMINOLE, FL 33777

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CR2E003 (11/05)

4. FEI Number <b>59-3388651</b>	Applied For
	Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent
STANMORE, THEODORE C 9095 BAYWOOD PARK DRIVE SEMINOLE, FL 33777

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2006, Fee will be \$900.00**

**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 STREET ADDRESS CITY-ST-ZIP	STANMORE, THEODORE C 9095 BAYWOOD PARK DRIVE SEMINOLE, FL 33777
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01/12/06-80021-010 508.75

**DO NOT WRITE  
IN THIS SPACE**

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 \_\_\_\_\_

Davidson Phone #