

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 MAR 11 AM 10:13

DOCUMENT # A96000001849

1. Entity Name
BIG SKY PARTNERS, LTD.



Principal Place of Business
1654 MARINA LAKE DRIVE
KISSIMMEE, FL 34744

Mailing Address
717 E. OAK ST.
KISSIMMEE, FL 34744

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02142005 Chg-LP CR2E003 (10/03)

4. FEI Number
59-3404313

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TANZILLO, ANDREW
1654 MARINA LAKE DR.
KISSIMMEE, FL 34744

Name

Street Address (P.O. Box Number is Not Acceptable)

1570 Kelley Avenue

Unit #2

City

Kissimmee,

FL

Zip Code

34744

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

9. Capital Contributions
as Shown on record. \$60,000.00

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

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

TANZILLO, ANDREW H
1654 MARINA LAKE DRIVE
KISSIMMEE, FL 34744

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

TANZILLO, JANICE E
1654 MARINA LAKE DRIVE
KISSIMMEE, FL 34744

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

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DOCUMENT #

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STREET ADDRESS

CITY-ST-ZIP

DOCUMENT #

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

900049109409
03/24/05-01050-024 **508.75

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 #

3/9/05

STAPLE CHECK HERE