## 2005 LIMITED PARTNERSHIP ANNUAL REPORT **Due By May 1, 2005**

FILED

## 2005 APR 15 PM 1: 14 DOCUMENT # A96000001903 SECRETARY OF STATE TALLAHASSEE, FLORIDA 4 2005 RECLIVED MAGPARK PARTNERS, LTD. Principal Place of Business Mailing Address 1201 SOUTH ORLANDO AVE., SUITE 360 P.O. BOX 607 WINTER PARK, FL 32789 WINTER PARK, FL 32790 2. Principal Place of Business 3. Mailing Address 1000 N. Orlando Avenue Suite, Apt. #, etc. Suite, Apt. #, etc. 01052005 Chg-LP CR2E003 (10/03) Suite D City & State City & State Applied For 4. FEI Number Winter Park, 59-3403892 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STRONG, DAVID C Street Address (P.O. Box Number is Not Acceptable) 1000 N. Orlando Avenue 1201 SOUTH ORLANDO AVE., SUITE 360 WINTER PARK, FL-32789 Suite D City Zip Code 32789 Winter Park 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 tamiliar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed policable ame of registered agent and little if a 9. Capital Contributions 10. Amount of Capital Contributions \$1,249.00 as Shown on record. 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 # P97000010251 STREET ADDRESS 1000 N. Orlando Ave., Suite D HAME STRONG/MAGPARK, INC. STREET ADDRESS 1201 SOUTH ORLANDO AVE. SHITE 360 CITY-ST-ZIP Winter Park, FL 32789 CITY-ST-ZIP WINTER PARK, Pt. 32789 DOCUMENT # STREET ADDRESS NAME **300054029843** 05/06/05--01111--002 \*\*14 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT 4 STREET ADDRESS NAME STREET ADDRESS COY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIF DOCUMENT ( STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not quality 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 Strong MagPark, Inc., General Partner

David C. Storng

CHECK HERE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/22/05

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