

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Jan 28, 2005 08:00 AM
Secretary of State

DOCUMENT # A96000002469

1. Entity Name
BMR INVESTMENTS, LTD.



Principal Place of Business Mailing Address
C/O ROBERT E. BREEN C/O ROBERT E. BREEN
1560 LANCASTER TERRACE, BROADVW TERR. #308 1560 LANCASTER TERRACE, BROADVW TERR. #308
JACKSONVILLE, FL 32204-4146 JACKSONVILLE, FL 32204-4146



2. Principal Place of Business Suite, Apt. #, etc.
 3. Mailing Address Suite, Apt. #, etc.

01122005 Chg-LP CR2E003 (10/03)

City & State City & State 4. FEI Number 59-3416314 Applied For Not Applicable

Zip Country Zip Country 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
BREEN, ROBERT E Name
BROADVIEW TERRACE #308 Street Address (P.O. Box Number is Not Acceptable)
1560 LANCASTER TERRACE
JACKSONVILLE, FL 32204-4146 City **FL** Zip Code

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. \$2,181,372.00 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 #	P96000103627	STREET ADDRESS	
NAME	BMR INVESTMENTS G.P., INC.	CITY-ST-ZIP	
STREET ADDRESS	1560 LANCASTER TERRACE, BROADVW TERR #308		
CITY-ST-ZIP	JACKSONVILLE, FL 322044146		
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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)(f), 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: *Robert E. Breen* 1/25/05 904-379-0648
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE