2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2005

Apr 18, 2005 08:00 AM Secretary of State DOCUMENT # A9700000032 1. Entity Name JOHN A. GRANT, JR. LIMITED PARTNERSHIP Principal Place of Business Mailing Address 3333 N. FEDERAL HIGHWAY, NO. 3 BOCA RATON FL 33431 3333 N. FEDERAL HIGHWAY, NO. 3 BOCA RATON FL 33431 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. 1ST MOORE CR2E003 (10/04) City & State City & State 4, FEI Number Applied For 65-0719225 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GRANT, JOHN A JR. Street Address (P.O. Box Number is Not Acceptable) 3333 N. FEDERAL HIGHWAY **BOCA RATON FL 33431** 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. 11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info. Signature, typed or printed name of registered agent and title if applicable DATE 10. Amount of Capital Contributions 9. Capital Contributions - \$3,000,000.00 in FLORIDA to date. as Shown on record. 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY DOCUMENT # P02000016429 STREET ADDRESS SURF & TURF ENTERPRISES, INC. II NAME STREET ADDRESS 3333 NORTH FEDERAL HIGHWAY, SUITE 3 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33431** DOCUMENT # STREET ADDRESS NAME STREET ADDRESS U00000313320 CITY-ST-ZIP CITY-ST-78P 04/18/05-80121-013 535.00 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP OOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZHP DOCUMENT# STREET ADDRESS NAME STREET ADDRESS CITY-ST-7IF 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 flue 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 employered to execute this seport as required by Chapter 620, Florida Statutes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SIGNATURE:

John A. Grant, Jr.

<u>4/7/05</u>

FILED