2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005 FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

20011		0500	ATT IN	TIVISION OF CORPORATIONS
DOCUMENT # A9700000569 1. Entity Name DALE A. SUTTHOFF FAMILY LIMITED PARTNERSHIP				05 MAR 11 AM 9: 42
Principal Place	of Business	Mailing Address		
901 BROWARI Orange City,		901 BROWARD AVENUE ORANGE CITY, FL 32763	3	ne
	,			I SECOND COLOR CONTROL
2. Principal Pla	ace of Business	3. Mailing Address	<u> </u>	
925 W	inifred Way	925 Winifre	ed: Way ——	((888) (818 1814 142); BEILL SHILL
Suite, Apt.	, etc.	Suite, Apt. #, etc.		01272005 Chg-LP CR2E003 (10/03)
City & State)	City & State		4. FEI Number Applied Fo
Lady L	ake FL Country	Lady Lake,	F L Country	59-3437183 Not Applic Secretificate of Status Processed \$8.75 Additional
321 <u>62</u>	1622	32162-1622	-	Fee Required
	6. Name and Address of Currer	nt Registered Agent	Name	7. Name and Address of New Registered Agent
SUTTHOFF			Da 1 e Sireet Addre	A Sutthoff ss (P.O. Box Number is Not Acceptable)
901 BROWARD AVENUE ORANGE CITY, FL 32763				
				inifred Way
			City	FL Zip Code 32162-1
8. The above	named entity submits this statement	for the purpose of changing its r	egistered office or regi	I 32162 1 Istered agent, or both, in the State of Florida. I am famillar with, and acc
the obligation	ions of registered agent.	Little	;	3-P.05
SIGNATURE -	Signature, typed or printed name of registered age	int and sittle if applicable.		DATE
9. Capital Con			Contributions	
as Shown o		in FLORIDA to da	988.037	7.17
· *f	A GENERAL PARTNER NOTE: General Partners N	I THAT IS A BUSINESS ENT MAY NOT be changed on th	ITTY MUST BE REG e form; an amend	SISTERED AND ACTIVE WITH THIS OFFICE.— ment must be filed to change a general partner.
12.	GENERAL PARTN	ER INFORMATION	13.	ADDRESS CHANGES ONLY
DOCUMENT /	SUTTHOFF, DALE A		STREET ADDRESS	925 Winifred Way
STREET ADDRESS	901 BROWARD AVENUE		CITY-ST-ZIP	Ten utilities was
CITY-ST-ZIP	ORANGE CITY, FL 32763			ady Lake, FL 32162-1622
DOCUMENT / NAME			STREET ADDRESS	
STREET ADDRESS			CITY-ST-ZIP	000048859760
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NAME #175				
STREET ADDRESS			CHY-ST-ZIP	•
STREET ADDRESS CITY-ST-ZIP	and the state of t	sith this filling doos not qualify for	the exemption stated i	in Section 119.07(3)(i), Florida Statutes, I further certify that the informati is if made under path; that I am a General Partner of the limited partners