2005 LIMITED PARTNERSHIP ANNUAL REPORT

FILED Due By May 1, 2005 May 05, 2005 08:00 AM Secretary of State DOCUMENT # A97000001213 1. Entity Name GRANDE HARBOR OCEAN CLUB, LTD. Mailing Address Principal Place of Business 119 EUCLID AVENUE 119 EUCLID AVENUE BIRMINGHAM, AL 35213-2906 BIRMINGHAM, AL 35213-2906 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03172005 CR2E003 (10/03) City & State City & State 4. FEI Number Applied For 72-1389668 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 WALTERS, ELIZABETH J ESQ Street Address (P.O. Box Number is Not Acceptable) 221 MCKENZIE AVENUE PANAMA CITY, FL 32401 City 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 primed name of registered agent and title if applicable. Capital Contributions 10. Amount of Capital Contributions \$1,000.00 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. ADDRESS CHANGES ONLY GENERAL PARTNER INFORMATION 12. 13. P97000047138 DOCUMENT # STREET ADDRESS EUCLID DEVELOPERS, INC. NAME STREET ADDRESS 119 EUCLID AVENUE CITY-ST-ZIP CITY-ST-7(P BIRMINGHAM, AL 352132906 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DOCUMENT #** STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADORESS STREET ADDRESS CITY-ST-ZIP 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 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 AND TYPED OR PRINTED NAME OF SIGNING

SIGNATURE: