

2005 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2005

**FILED**  
**Apr 18, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # A97000001275

1. Entity Name  
HIGDON ENTERPRISES LIMITED, LLLP



Principal Place of Business Mailing Address  
130 N. VA. STREET 130 N. VA. STREET  
QUINCY, FL 32353 QUINCY, FL 32353



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

03312005 Chg-LP CR2E003 (10/03)

City & State City & State 4. FEI Number 59-3471251 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 HIGDON, JOSEPH W JR.  
130 N. VIRGINIA ST  
QUINCY, FL 32351  
7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
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. \$13,500,000.00 10. Amount of Capital Contributions in FLORIDA to date. 13,500,000.00

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 #	NAME	STREET ADDRESS	
NAME	SMITH, MARGARET H	CITY - ST - ZIP	
STREET ADDRESS	2695 MILLER LANDING ROAD		
CITY - ST - ZIP	TALLAHASSEE, FL 32312		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	HIGDON, JOSEPH W JR	CITY - ST - ZIP	
STREET ADDRESS	P.O. BOX 1739		
CITY - ST - ZIP	QUINCY, FL 32353		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	HIGDON, JOSEPH W TRUSTEE	CITY - ST - ZIP	
STREET ADDRESS	P.O. BOX 1739		
CITY - ST - ZIP	QUINCY, FL 32353		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	SMITH, MARGARET H TRUSTEE	CITY - ST - ZIP	
STREET ADDRESS	P.O. BOX 1739		
CITY - ST - ZIP	QUINCY, FL 32353		
DOCUMENT #	NAME	STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			
DOCUMENT #	NAME	STREET ADDRESS	
NAME		CITY - ST - ZIP	
STREET ADDRESS			
CITY - ST - ZIP			

H0000001275  
04/18/05-80121-004 535.00

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: Joseph W. Higdon 04-08-05 (850)627-7564  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE