

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

## Due By September 7, 2005

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 JUL 11 AM 10:35

DOCUMENT # A97000001458

1. Entity Name  
VAUGHAN PREMIER, LTD.



Principal Place of Business  
218 MYRTLE RIDGE RD.  
LUTZ, FL 33549

Mailing Address  
P. O. BOX 698  
LUTZ, FL 33548

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07072005 Chg-LP CR2E003 (10/03)

City & State

City & State

4. FEI Number  
59-3454407

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

VAUGHAN, LESTER  
218 MYRTLE RIDGE RD.  
LUTZ, FL 33549

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. \$10,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

In accordance with s. 607.193(2)(b), F.S.,  
the limited partnership did not receive the  
prior notice.

**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  
CITY-ST-ZIP

VAUGHAN, LESTER  
218 MYRTLE RIDGE ROAD  
LUTZ, FL 33549

STREET ADDRESS  
CITY-ST-ZIP

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07/21/05--01074--021 \*\*158.75

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:

*Lester Vaughan*

July 7, 2005

(813) 949-3861

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE