2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)

DUE BY MAY 1, 2005 FILED Feb 28, 2005 08:00 AM DOCUMENT # A97000001600 **Secretary of State** 1. Entity Name LITHIA ASSOCIATES LIMITED PARTNERSHIP Principal Place of Business Mailing Address 165 WEST ROBERTSON BRANDON FL 33511 165 WEST ROBERTSON BRANDON FL 33511 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt #, etc. CR2E003 (10/04) 1ST MOORE City & State City & State 4. FEI Number Applied For 59-3458217 Not Applicable Zıp Country Ζip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LITHIA INVESTMENTS, INC. Street Address (P.O. Box Number is Not Acceptable) 165 WEST ROBERTSON BRANDON FL 33511 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. 11. FILE NOW!!! Due by May 1, 2005. SIGNATURE Signature typholor printed name of registered agent and title 1 applicable See Block 11 instructions for fee info. DATE 9. Capital Contributions 10. Amount of Capital Contributions \$1,000,000,00 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 ADDRESS CHANGES ONLY 12. P97000062917 DOCUMENT # STREET ADDRESS LITHIA INVESTMENTS, INC. NAME STREET ADDRESS 165 WEST ROBERTSON <u>Undigi cyby figg god god do</u> donien donien god CITY-ST ZIP CITY ST 7IP BRANDON FL 33511 DOCUMENT # STREET ADDRESS NAL IF STREET ADDRESS CITY-ST-7/P CITY ST ZIE DOCUMENT# steet angeres NAME STREET AUDRESS CHY-51-39 CHTY ST ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CHY ST 7/P CHY S# ZIP DOCUMENT# STREET ADDRESS STREET ASORESS OUY-ST 76 CITY STIZIP

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

CUTY-ST-ZIP

STREET ADDRESS

SIGNATURE:

CHEUK MEKE

DOCUMENT#

CITY ST ZIP

NAME STREET ADDRESS

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING GENERAL PARTNER