

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

## Due By May 1, 2005

DOCUMENT # A97000001716	
1. Entity Name NOVA & HAND, LTD.	



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 JAN 18 AM 9:54

Principal Place of Business 837 N. GARLAND AVENUE ORLANDO, FL 32801	Mailing Address 204 E. 17TH ST., STE. 202 COSTA MESA, CA 92627
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2. Principal Place of Business 10933 84th Place NE Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State Kirkland, Washington	City & State
Zip 98034	Country USA



01052005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3462358	Applied For Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DECUBELLIS & MEEKS PROFESSIONAL ASSOC. 837 N. GARLAND AVENUE ORLANDO, FL 32801	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$1,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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**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	P97000068021 NOVA ROAD, INC. 705 E. OAK STREET, SUITE E KISSIMMEE, FL 34744	STREET ADDRESS CITY-ST-ZIP	10933 84th Place NE Kirkland, Washington 98034
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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: Steven L. Gumpert Steven L. Gumpert 1/14/05 (949) 764-2669  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE