

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
05 APR 27 PM 5:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # A97000001836</b> 1. Entity Name <b>SECURITY FIRST TITLE PARTNERS OF FT. LAUDERDALE, LTD.</b>					
Principal Place of Business <b>1745 B NORTH UNIVERSITY DR.          PLANTATION, FL 33322</b>			Mailing Address <b>7360 BRYAN DAIRY RD., STE 200          LARGO, FL 33777</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		04202005    Chg-LP    CR2E003 (10/03)	
4. FEI Number <b>59-3455103</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>THE SECURITY FIRST TITLE AFFILIATES, INC.          7360 BRYAN DAIRY RD., STE 200          LARGO, FL 33777</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. <b>\$40,000.00</b>			10. Amount of Capital Contributions in FLORIDA to date. <b>368.75</b>		
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION				13. ADDRESS CHANGES ONLY	
DOCUMENT #	P95000040857			STREET ADDRESS	
NAME	THE SECURITY FIRST TITLE AFFILIATES, INC.			CITY-ST-ZIP	
STREET ADDRESS	7360 BRYAN DAIRY ROAD, STE. 200				
CITY-ST-ZIP	LARGO, FL 33777				
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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					
<b>SIGNATURE: <u>Michael LaRosa, up of Gen. Part.</u>    4/21/05    727-549-3300</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER    Date    Daytime Phone #</small>					

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