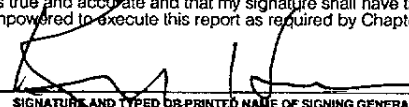


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
Jan 12, 2005 08:00 AM
Secretary of State

DOCUMENT # A97000002176					
1. Entity Name HORNER HOLDINGS, LLLP					
Principal Place of Business 8105 ANDERSON ROAD TAMPA, FL 33684		Mailing Address 8105 ANDERSON ROAD TAMPA, FL 33684			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3472351	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HORNER, KENNETH F 8105 ANDERSON ROAD TAMPA, FL 33684				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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.					
9. Capital Contributions as Shown on record. \$1,560,101.20		10. Amount of Capital Contributions in FLORIDA to date			
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		
STREET ADDRESS	CONCHITA ELAINE HORNER TRUSTEE		CITY - ST - ZIP		
CITY - ST - ZIP	TAMPA, FL 33684		STREET ADDRESS		
DOCUMENT #	NAME		CITY - ST - ZIP		
STREET ADDRESS			STREET ADDRESS	000000177824	
CITY - ST - ZIP			CITY - ST - ZIP	01/12/05-80001-020 526.25	
DOCUMENT #	NAME		STREET ADDRESS		
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DOCUMENT #	NAME		CITY - ST - ZIP		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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: 			1/4/05 813 8851654 x230		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER KENNETH F. HORNER			Date Daytime Phone #		

STAPLE CHECK HERE