


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

FILED

2005 APR 26 PM 12: 29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A97000002291	
1. Entity Name THE CRACCHIOLO GROUP LIMITED PARTNERSHIP	

Principal Place of Business 2855 S. CONGRESS AVE., SUITE A DELRAY BEACH, FL 33445	Mailing Address 2855 S. CONGRESS AVE., SUITE A DELRAY BEACH, FL 33445
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2. Principal Place of Business <i>601 N. CONGRESS AVE.</i>	3. Mailing Address <i>601 N. CONGRESS AVE.</i>
Suite, Apt. #, etc. <i>SUITE 305</i>	Suite, Apt. #, etc. <i>SUITE 305</i>

City & State <i>DELRAY BEACH, FL</i>	City & State <i>DELRAY BEACH, FL</i>
Zip <i>33445</i>	Country <i>USA</i>



04212005 Chg-LP CR2E003 (10/03)

6. Name and Address of Current Registered Agent CRACCHIOLO, JOHN E 2855 S. CONGRESS AVE., SUITE A DELRAY BEACH, FL 33445	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <i>601 N. CONGRESS AVE.</i> <i>SUITE 305</i> City <i>DELRAY BEACH</i> FL Zip Code <i>33445</i>	

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. \$1,000,000.00	10. Amount of Capital Contributions in FLORIDA to date. \$18,102.00
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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	F97000005546 CHESTERFIELD PARK CORPORATION 2855 S. CONGRESS AVE., SUITE A DELRAY BEACH, FL 33445	STREET ADDRESS CITY - ST - ZIP	<i>601 N. CONGRESS AVE., SUITE 305</i> <i>DELRAY BEACH, FL 33445</i>
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STAPLE CHECK HERE

11. 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: *[Signature]* **4-22-05** (561) 243-9800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

**JOHN E. CRACCHIOLO, SEC. TREAS. CHESTERFIELD PARK CORP.
GENERAL PARTNER**