2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2005

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DOCUMENT # A9700002426 1. Entity Name				SECRETARY OF STATE DIVISION OF CORPORATIONS	
PATRIOT FARMS, LIMITED PARTNERSHIP					05 MAR 14 AM 9:49
Principal Place of Business Mailing Address					1
2696 SW 96TH STREET 2696 SW 96TH STREE			T		_
STUART FL 34997 STUART FL 34997					COMMINSTER SOUR LOAN DAME NAME AND ADDRESS OF THE PROPERTY OF
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1ST MOORE CR2E003 (10/04)
City & State		City & State			4. FEI Number 65-0792266 Applied For Not Applicable
Zip	Country Zip		Country		5. Certificate of Status Desired See Required Fee Required
6. Name and Address of Current Registered Agent		Registered Agent	1		7. Name and Address of New Registered Agent
				Name 44	chuess Chause and
FARACH, MANUEL				Street Address ((P.O. Box Number is Not Acceptable)
1645 PALM BEACH LAKES BLVD., SUITE 1200 WEST PALM BEACH FL 33401					
WEST I ALW BEACHTE 35401				フフフ	S. Flasler Dr
				City est	Palm Bch FL Zip Code 33401
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 Signature, typed or printed name of registered agent and title 4 applicable DATE See Block 11 instructions for fee info.					
9. Capital Contributions as Shown on record. \$7,500.00 in FLORIDA to date.				butions	
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 /	P97000095476				ADDRESS CHANGES ONE!
NAME	PATRIOT FARMS, INC.		SIR	EET AODRESS	
	2696 S.W. 96TH STREET		CITY	'-ST-ZIP	
CITY-ST-ZIP	STUART FL 34997				700048845017
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DOCUMENT #			LET ADDRESS		
NAME			SIR	STREET ADDRESS	
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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					