
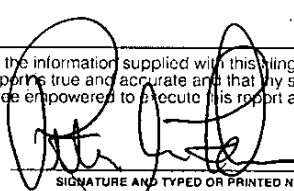


# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 JAN 24 AM 9:54

<b>DOCUMENT # A98000000448</b> 1. Entity Name DOWNTOWN FLAGLER VILLAGE, LTD.					
Principal Place of Business 418 N.E. 5TH STREET FORT LAUDERDALE, FL 33301			Mailing Address P.O. BOX 030399 FT LAUDERDALE, FL 33303		
2. Principal Place of Business <b>441 N. E. 4th Avenue</b> Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		01132005 Chg-LP CR2E003 (10/03)	
City & State <b>Fort Lauderdale Florida</b> Zip Country		City & State Zip Country		4. FEI Number <b>65-0863450</b> Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent <b>FELDMAN, PETER M</b> <b>418 N.E. 5TH STREET</b> <b>FORT LAUDERDALE, FL 33301</b>	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>441 N. E. 4th Avenue</b> 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>\$850,000.00</b>		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 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP <b>P97000083132 425 FEDERAL, INC. 418 N.E. 5TH STREET FORT LAUDERDALE, FL 33301</b>			13. ADDRESS CHANGES ONLY STREET ADDRESS CITY-ST-ZIP <b>441 N. E. 4th Avenue</b> <b>300045696683</b> <b>01/31/05--01036--007 **526.25</b>		
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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>Peter M. Feldman, President</b> <b>425 Federal, Inc., General Partner</b> SIGNATURE:  <b>954-583-4050</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> <span style="float: right;">Daytime Phone #</span>					

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