


# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

## Due By May 1, 2005

\* FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 MAR -7 AM 9:36

DOCUMENT # A98000001076					
1. Entity Name JAJOLO LIMITED PARTNERSHIP					
Principal Place of Business 2476 N. ESSEX AVE. HERNANDO, FL 34442			Mailing Address 2476 N. ESSEX AVE. HERNANDO, FL 34442		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01192005 Chg-LP CR2E003 (10/03)	
Zip		Country		4. FEI Number 59-3507061	
				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			7. Name and Address of New Registered Agent		
ABEL, ERIC D ESQ. 2476 N ESSEX AVE HERNANDO, FL 34442			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. \$250,000.00			10. Amount of Capital Contributions in FLORIDA to date.		
<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 # NAME STREET ADDRESS CITY-ST-ZIP	P97000104372 KELLER COURT, INC. 2450 N. CITRUS HILLS BLVD. HERNANDO, FL 34442		STREET ADDRESS	2476 N. Essex Avenue	
			CITY-ST-ZIP	Hernando, FL 34442	
			STREET ADDRESS		
			CITY-ST-ZIP		
			STREET ADDRESS	000048186470	
			CITY-ST-ZIP	03/11/05--01005--024 **526.25	
			STREET ADDRESS		
			CITY-ST-ZIP		
			STREET ADDRESS		
			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: <u>Stephen A. Tamposi</u>			Stephen A. Tamposi		3/4/05
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			<small>Date</small>		<small>Daytime Phone #</small>

STAPLE CHECK HERE

*[Handwritten initials]*

