

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

**FILED**

**Apr 26, 2005 08:00 AM  
Secretary of State**

<b>DOCUMENT # A98000001367</b> 1. Entity Name <b>THE BRKA LIMITED PARTNERSHIP</b>					
Principal Place of Business <b>2600 SOUTH OCEAN BLVD. UNIT 508-S PALM BEACH FL 33480</b>			Mailing Address <b>2600 SOUTH OCEAN BLVD. UNIT 508-S PALM BEACH FL 33480</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number <b>65-0843686</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>CARROLL, WILLIAM C ONE NORTH CLEMATIS STREET SUITE 400 PALM BEACH FL 33401</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 <small>Signature, typed or printed name of registered agent and title if applicable</small>				DATE <b>11. FILE NOW!!! Due by May 1, 2005.</b> <b>See Block 11 instructions for fee info.</b>	
9. Capital Contributions as Shown on record.		\$1,000,000.00		10. Amount of Capital Contributions in FLORIDA to date <b>1,030,000.00</b>	
<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>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT #	P98000049006		STREET ADDRESS		
NAME	BRKA, INC.		CITY-ST-ZIP		
STREET ADDRESS	2600 SOUTH OCEAN BLVD., UNIT 508-S				
CITY-ST-ZIP	PALM BEACH FL 33480				
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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)(f), 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 the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

**SIGNATURE:** *Thomas K. Freyberg* **THOMAS K. FREYBERG** 4/12/05 SC1-5856715

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #