

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED

2005 APR 13 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A98000001431

1. Entity Name
NUGENT FAMILY LIMITED PARTNERSHIP



Principal Place of Business
3796 QUAIL RIDGE DRIVE
BOYNTON BEACH, FL 33436

Mailing Address
3796 QUAIL RIDGE DRIVE
BOYNTON BEACH, FL 33436

2. Principal Place of Business

321 Royal Poinciana Plaza South
Suite, Apt. #, etc.

3. Mailing Address

224 Cedar Club Circle
Suite, Apt. #, etc.



02212005 Chg-LP CR2E003 (10/03)

City & State

Palm Beach FL
Zip 33480 Country USA

City & State

Chapel Hill NC
Zip 27517 Country USA

4. FEI Number

65-0842930

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COLNU CORP.
3796 QUAIL RIDGE DRIVE
BOYNTON BEACH, FL 33434

7. Name and Address of New Registered Agent

Name Neil Knight Alley, Maass, Rogers & Lindsay, PA
Street Address (P.O. Box Number is Not Acceptable)
321 Royal Poinciana Plaza South
City Palm Beach FL Zip Code 33480

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 if applicable.

DATE

9. Capital Contributions as Shown on record.

\$1,429,956.00

10. Amount of Capital Contributions in FLORIDA to date.

\$1,429,956.00

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 # P98000039177
NAME COLNU, CORP.
STREET ADDRESS 3796 QUAIL RIDGE DRIVE
CITY-ST-ZIP BOYNTON BEACH, FL 33436

13. ADDRESS CHANGES ONLY

STREET ADDRESS 224 Cedar Club Circle
CITY-ST-ZIP Chapel Hill, NC 27517

DOCUMENT #
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STREET ADDRESS
CITY-ST-ZIP

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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: Margaret C. Nugent

3/15/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

MARGARET C. NUGENT

STAPLE CHECK HERE