

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

DOCUMENT # A98000001510 1. Entity Name NASSAU PARTNERS, LTD.	
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Principal Place of Business 510 S. 3RD STREET JACKSONVILLE BEACH, FL 32250	Mailing Address 510 S. 3RD STREET JACKSONVILLE BEACH, FL 32250
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2. Principal Place of Business 2315 Beach Blvd. Suite, Apt. #, etc. Suite 203 City & State Jacksonville Beach, FL Zip 32250 Country U.S.	3. Mailing Address 2315 Beach Blvd. Suite, Apt. #, etc. Suite 203 City & State Jacksonville Beach, FL Zip 32250 Country U.S.
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04292005 Chg-LP CR2E003 (10/03)

4. FEI Number 59-3526643	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent STONEBURNER BERRY GOLDMAN & SIMMONS, P.A. 841 PRUDENTIAL DRIVE, #1400 JACKSONVILLE, FL 32207	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____
Signature, typed or printed name of registered agent and title if applicable.

9. Capital Contributions as Shown on record. \$250,000.00	10. Amount of Capital Contributions in FLORIDA to date.
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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 #	P98000053812	STREET ADDRESS	2315 Beach Blvd., Suite 203
NAME	WOODBURN INVESTMENTS, INC.	CITY-ST-ZIP	Jacksonville Beach, FL 32250
STREET ADDRESS	510 S. 3RD STREET	STREET ADDRESS	500055332085
CITY-ST-ZIP	JACKSONVILLE BEACH, FL 32250	CITY-ST-ZIP	05/25/05--01052--014 **526.25
DOCUMENT #		STREET ADDRESS	
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DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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>Henry P. Woodburn</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	Date: <u>4/29/05</u>	Daytime Phone #: <u>904 246 4555</u>
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FILED
 2005 MAY -2 PM 1:35
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



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