
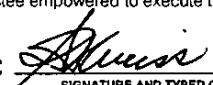


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By September 7, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JUL 14 AM 9:55

DOCUMENT # A98000001580					
1. Entity Name WEISS ASSET MANAGEMENT LIMITED PARTNERSHIP					
Principal Place of Business 3211 SOUTH OCEAN BLVD., #301 HIGHLAND BEACH, FL 33487			Mailing Address 3211 SOUTH OCEAN BLVD., #301 HIGHLAND BEACH, FL 33487		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 07112005 Chg-LP CR2E003 (10/03) 65-0857135	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WEISS, STANLEY P 3211 SOUTH OCEAN BLVD., #301 HIGHLAND BEACH, FL 33487			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City FL 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. \$3,000,000.00		10. Amount of Capital Contributions in FLORIDA to date.		In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.	
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 #	G05020900088		STREET ADDRESS		
NAME	LARRY S. WEISS REVOCABLE TRUST		CITY-ST-ZIP	400057769234	
STREET ADDRESS	2391 HALBURTON			07/22/05--01003--023 **526.25	
CITY-ST-ZIP	BEACHWOOD, OH 44122				
DOCUMENT #	WEISS, MICHAEL B		STREET ADDRESS		
NAME	1881 WESTLEIGH DR.		CITY-ST-ZIP		
STREET ADDRESS	GLENVIEW, IL 60025				
CITY-ST-ZIP					
DOCUMENT #	G05020900087		STREET ADDRESS		
NAME	JANICE BROWN TRUST		CITY-ST-ZIP		
STREET ADDRESS	7351 N. KOSTNER AVENUE				
CITY-ST-ZIP	LINCOLNWOOD, IL 60712				
DOCUMENT #	WEISS, SHELDON A		STREET ADDRESS		
NAME	5518 RIDGEMOOR COURT		CITY-ST-ZIP		
STREET ADDRESS	ROCKFORD, IL 61107				
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS					
CITY-ST-ZIP					
DOCUMENT #			STREET ADDRESS		
NAME			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:  S.P. WEISS			7-13-05 (561) 278-8302		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		

STAPLE CHECK HERE