2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

STAPLE CHECK HERE

SIGNATURE:

**FILED** 

| Due by may 1, 2000  |  |                         |                     |                                       | , May 05, 2005 08:00 AM |                            |   |
|---|--|-------------------------|---------------------|---------------------------------------|-------------------------|----------------------------|---|
| DOCUMENT # A9800001889  1. Entity Name TEMPUS RESORTS REALTY, LTD.  |  |                         |                     |                                       | Secretary of State      |                            |   |
| Principal Place of Business Mailing Address   |  |                         |                     |                                       | Ì                       |                            |   |
| 7380 SAND LAKE ROAD, STE. 600 ORLANDO, FL 32819  7380 SAND LAKE ROAD, STE. 600 ORLANDO, FL 32819  |  |                         |                     | 600                                   |                         |                            |   |
|   |  |                         |                     |                                       | (                       | # B   [#    #B             | iir Berii Karal iiesi leiki leiki leika leikel er ira |
| Principal Place of Business   |  | 3. Mailing Address      |                     |                                       |                         |                            |   |
| Suite, Apt. #, etc. S   |  | Suite, Apt. #, etc.     | Suite, Apt. #, etc. |                                       | 04152005                | Chg-LP                     | CR2E003 (10/03)                                       |
| City & State  |  | City & State            |                     | 4. FEI Number 59-3535                 |                         | Applied For Not Applicable |   |
| Zip   | Country Zip C                                      |                         | Coun                | itry                                  |                         | f Status Desired           | \$8.75 Additional                                     |
|   | S. Nowe and Salabase of Courses                    | Desirement Second       |                     | · · · · · · · · · · · · · · · · · · · | L                       |                            | ree Required  |
|   | 6. Name and Address of Current                     | Redistered Agent        |                     | Name                                  | 7. Name and A           | adress of New H            | Registered Agent                                      |
| CORPORATION SERVICE COMPANY<br>1201 HAYS STREET<br>TALLAHASSEE, FL 32301-2525   |  |                         |                     |                                       |                         |                            |   |
|   |  |                         |                     | Street Address (I                     | P.O. Box Number         | is Not Acceptable          | e)  |
|   |  |                         |                     |                                       |                         |                            |   |
|   |  |                         |                     | City                                  |                         |                            | FL Zip Gode   |
| 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  |  |                         |                     |                                       |                         |                            |   |
| 9. Capital Contributions as Shown on record. \$47,212,890.00 In FLORIDA to date. 47, 212,890.00   |  |                         |                     |                                       |                         |                            |   |
| 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 PARTNE                                     |                         | ; an amenomen       | t must be med                         | ADDRESS CHA             |                            |   |
| DOCUMENT #  | L99000009242                                       | THE OT SER (11014 -14 - | 13.                 |                                       |                         |                            | 37020 3721  |
| NAME  | TPI HOLDINGS, LLC                                  |                         | STRE                | ET ADDRESS                            |                         |                            |   |
| STREET ADDRESS<br>CITY-ST-ZIP   | 7380 SAND LAKE ROAD, STE. 600<br>ORLANDO, FL 32819 |                         | CITY                | -ST-ZIP                               | //00000362732<br>       |                            |   |
| DOCUMENT #<br>NAME  |  |                         | STRE                | ET ADDRESS                            |                         |                            |   |
| STREET ADDRESS<br>CITY-\$T-ZIP  | ESS  |                         | CITY                | -ST-ZIP                               |                         | ··                         |   |
| DOCUMENT #<br>NAME  |  |                         | STRE                | ET ADDRESS                            | ·                       |                            | <u> </u>  |
| STREET ADDRESS<br>CITY-ST-ZIP   |  |                         | CITY-               | -ST-ZIP                               |                         |                            |   |
| DOCUMENT #<br>NAME  |  |                         | STRE                | ET ADDRESS                            |                         |                            |   |
| STREET ADDRESS<br>CITY-ST-ZIP   |  |                         | СПҮ                 | -ST-ZIP                               |                         |                            |   |
| DOCUMENT #<br>NAME  |  |                         | STRE                | ET ADDRESS                            |                         |                            |   |
| SPREET ADDRESS<br>CHY+ST-ZIP  |  |                         | CITY-               | ST-ZIP                                |                         |                            |   |
| DOCUMENT #  |  |                         | STRE                | ET ADDRESS                            |                         |                            |   |
| STREET ADDRESS<br>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 |  |                         |                     |                                       |                         |                            |   |

Andrew mercus VP of Tempus mking int'l line,
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SCHATURE AND TYPED OR PRINTED MAKE OF SIGNING GENERAL PARTNER

4/18/05

Daytime Phone #