



**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
**Jan 20, 2005 08:00 AM**  
**Secretary of State**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                      |                                          |                                                                                        |                                                                                                                                                                                                                                       |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------------------------------------|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>DOCUMENT # A98000002256</b><br>1. Entity Name<br><b>THE WILLIAM &amp; MELODIE DOUGLAS FAMILY LIMITED PARTNERSHIP, LTD.</b>                                                                                                                                                                                                                                                                                                                                                               |                                      |                                          |                                                                                        |                                                                                                                                                      |  |
| Principal Place of Business<br><b>2500 34TH STREET NORTH<br/>         ST. PETERSBURG, FL 33713</b>                                                                                                                                                                                                                                                                                                                                                                                          |                                      |                                          | Mailing Address<br><b>2500 34TH STREET NORTH<br/>         ST. PETERSBURG, FL 33713</b> |                                                                                                                                                                                                                                       |  |
| 2. Principal Place of Business<br>Suite, Apt #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      | 3. Mailing Address<br>Suite, Apt #, etc. |                                                                                        |                                                                                                                                                     |  |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                      | City & State                             |                                                                                        | 4. FEI Number<br><b>59-3538483</b>                                                                                                                                                                                                    |  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                      | Country                                  |                                                                                        | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                       |  |
| 6. Name and Address of Current Registered Agent<br><b>BERGER, TODD ESQ.<br/>         810 63RD AVENUE NORTH<br/>         ST. PETERSBURG, FL 33702</b>                                                                                                                                                                                                                                                                                                                                        |                                      |                                          |                                                                                        | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><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 _____ DATE _____<br><small>Signature, typed or printed name of registered agent and title if applicable.</small>                                                                                                                                                                                                                                                                                                                                                                  |                                      |                                          |                                                                                        |                                                                                                                                                                                                                                       |  |
| 9. Capital Contributions as Shown on record. <b>\$2,000.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                              |                                      |                                          | 10. Amount of Capital Contributions in FLORIDA to date.                                |                                                                                                                                                                                                                                       |  |
| <b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b><br><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 #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>V69523</b>                        |                                          | STREET ADDRESS                                                                         |                                                                                                                                                                                                                                       |  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>VEHICLE SAFETY PRODUCTS, INC.</b> |                                          | CITY-ST-ZIP                                                                            |                                                                                                                                                                                                                                       |  |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>2500 34TH STREET NORTH</b>        |                                          |                                                                                        | <b>000000185110</b><br><b>01/21/05-80002-005 141.25</b>                                                                                                                                                                               |  |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>ST. PETERSBURG, FL 33713</b>      |                                          | CITY-ST-ZIP                                                                            |                                                                                                                                                                                                                                       |  |
| DOCUMENT #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      |                                          | STREET ADDRESS                                                                         |                                                                                                                                                                                                                                       |  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      |                                          | CITY-ST-ZIP                                                                            |                                                                                                                                                                                                                                       |  |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                      |                                          |                                                                                        |                                                                                                                                                                                                                                       |  |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                                          | CITY-ST-ZIP                                                                            |                                                                                                                                                                                                                                       |  |
| DOCUMENT #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      |                                          | STREET ADDRESS                                                                         |                                                                                                                                                                                                                                       |  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      |                                          | CITY-ST-ZIP                                                                            |                                                                                                                                                                                                                                       |  |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                      |                                          |                                                                                        |                                                                                                                                                                                                                                       |  |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                                          | CITY-ST-ZIP                                                                            |                                                                                                                                                                                                                                       |  |
| DOCUMENT #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      |                                          | STREET ADDRESS                                                                         |                                                                                                                                                                                                                                       |  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      |                                          | CITY-ST-ZIP                                                                            |                                                                                                                                                                                                                                       |  |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                      |                                          |                                                                                        |                                                                                                                                                                                                                                       |  |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                      |                                          | CITY-ST-ZIP                                                                            |                                                                                                                                                                                                                                       |  |
| DOCUMENT #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                      |                                          | STREET ADDRESS                                                                         |                                                                                                                                                                                                                                       |  |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                      |                                          | CITY-ST-ZIP                                                                            |                                                                                                                                                                                                                                       |  |
| 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 |                                      |                                          |                                                                                        |                                                                                                                                                                                                                                       |  |
| <b>SIGNATURE:</b> <u>W.S.P. ENG</u> <u>WILLIAM DOUGLAS</u> <u>1/7/05</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>                                                                                                                                                                                                                                                                                                                                   |                                      |                                          |                                                                                        |                                                                                                                                                                                                                                       |  |

STAPLE CHECK HERE

Date Daytime Phone #  
**727-323-2000**