


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
05 APR 12 PM 5:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A98000002351					
1. Entity Name MONTICELLO PARTNERSHIP, LTD.					
Principal Place of Business 2851 REMINGTON GREEN CIRCLE, SUITE D TALLAHASSEE, FL 32308			Mailing Address 2851 REMINGTON GREEN CIRCLE, SUITE D TALLAHASSEE, FL 32308		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BITTMAN, MICHAEL J 301 E. PINE ST., STE. 1400 ORLANDO, FL 32801			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. \$7,000.00			10. Amount of Capital Contributions in FLORIDA to date.		
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 #	P98000086461		STREET ADDRESS		
NAME	J. P. LAKE, INC.		CITY-ST-ZIP		
STREET ADDRESS	2851 REMINGTON GREEN CIRCLE, SUITE D				
CITY-ST-ZIP	TALLAHASSEE, FL 32308				
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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: <i>[Signature]</i> C.G. FARMER			SIGNATURE: <i>[Signature]</i> J.P. LAKE, INC.		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date 4/10/05 Daytime Phone # 850-386-2522		



03162005 Chg-LP CR2E003 (10/03)

4. FEI Number **59-3538192** Applied For Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

STAPLE CHECK HERE