

# **2005 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000002358

**FILED**  
**Mar 14, 2005**  
**Secretary of State**

**Entity Name:** COASTAL PASCO PARTNERS, LTD. LLP

**Current Principal Place of Business:**

28100 U.S. HIGHWAY, SUITE 511  
CLEARWATER, FL 33761

**New Principal Place of Business:**

3248 MASTERS DRIVE  
CLEARWATER, FL 33761

**Current Mailing Address:**

28100 U.S. HIGHWAY, SUITE 511  
CLEARWATER, FL 33761

**New Mailing Address:**

3248 MASTESR DRIVE  
CLEARWATER, FL 33761

**FEI Number:** 59-3536231

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

TRAUB, JOEL S  
3248 MASTERS DRIVE  
CLEARWATER, FL 33761 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Capital Contributions as Shown on record:** 200.00

**Amount of Capital Contributions in Florida to date:** 200.00

**GENERAL PARTNER INFORMATION:**

Document #: P98000084083  
Name: COASTAL C.P.P. PARTNERS, INC.  
Address: 3248 MASTERS DRIVE  
City-St-Zip: CLEARWATER, FL 33761

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: JOEL TRAUB

PRES

03/14/2005

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date