

2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED

Apr 27, 2005 08:00 AM
Secretary of State

DOCUMENT # A98000002592

1. Entity Name
RAMLEE HOLDINGS LIMITED PARTNERSHIP



Principal Place of Business
**5536 ISLEWORTH COUNTRY CLUB DRIVE
 WINTERMERE, FL 34789**

Mailing Address
**5536 ISLEWORTH COUNTRY CLUB DRIVE
 WINTERMERE, FL 34789**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01262005 Chg-LP

CR2E003 (10/03)

City & State

City & State

4. FEI Number

59-3543122

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CRAIN, RAMSAY E
 5536 ISLEWORTH COUNTRY CLUB DRIVE
 WINTERMERE, FL 34789**

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

Signature, typed or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions
 as shown on record. **\$4,086,241.00**

10. Amount of Capital Contributions
 in FLORIDA to date. **\$4,086,241.00**

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 PARTNER INFORMATION

13.

ADDRESS CHANGES ONLY

DOCUMENT # **L98000002783**
 NAME **DORM, LLC**
 STREET ADDRESS **5536 ISLEWORTH COUNTRY CLUB DRIVE**
 CITY-ST-ZIP **WINTERMERE, FL 34789**

STREET ADDRESS

CITY-ST-ZIP

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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: Ramsay E. Crain

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

March 21, 2005
 Date Daytime Phone #