2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

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Principal Place of Business Soil SAMPAGES VILLAGE CIRCLE, STE. ONE PONTE VEDRA BEACH, FL 32082	1. Entity Nam	MENT # A98000002 TURE PVB, LTD.	2805			SE	CRETARY I	OF STATE FLORIC	- JA
Suite. Apt. #, etc. Suite. Apt. #, etc. 03232005 Chg-LP CREE003 (10/03) City & State	5000 SAWGR	RASS VILLAGE CIRCLE, STE. ONE	5000 SAWGRASS VILL						
City & State A FEI Number	2. Principal P	Place of Business	3. Mailing Address						
Zip Country Zip S-9-3552131 September State Application State Point State Of State State Desired State Desired State State State Of State State Desired State State State Of State S	Suite, Apt. #, etc. Suite, Apt. #, etc.					03232005 Chg-LP CR2E003 (10/03)			
Country Zip Country S. Certificate of Status Desired \$8.75 Additional Festinguistic	City & Stat	e	City & State	City & State		1 11			Applied For
8. Name and Address of Current Registered Agent WEBER, BRYAN L Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Forida. I am familiar with, and acceptable in the colgations of registered agent. 9. Capital Contributions 9. Capital Contributions 9. Capital Contributions 55,750,000.00 10. Amount of Capital Contributions as Shown in record. A GENERAL PARTINER 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 filled to change a general partner. 12. GENERAL PARTINER INFORMATION 13. ADDRESS CHANGES ONLY COCUMENT / P98000105489 NME SIRES ADDRESS CITY-ST-ZIP DOCUMENT / NAME SIRES ADDRESS CITY-ST-ZIP DOCUMENT / NAM	Zip	Country	Zip	Zip Country		5 Certificate of Status Desired \$8.			3.75 Additional
WEBER BRYAN L 5000 SAWGRASS VILLAGE CIRCLE, STE. ONE PONTE VEDRA BEACH, FL 32082 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 acceptable to obligations of registered agent. SIGNATURE Signature specific period agent of ingered agent and the inspectable. 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 filled to change a general partner. TO DOUGHET I ST. 2P STEET ADDRESS CHANGES ONLY STREET ADDRESS CITY-ST-2P CONDENT I MAY STREET ADDRESS CITY-ST-2P CONDENT		6. Name and Address of Current	Registered Agent		Name	7. Name and	Address of New F		
City FL Zip Code 8. The above named critity 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 accelerate obligations of registered agent. SIGNATURE 9. Capital Contributions									
B. The above named critity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accelerate obligations of registered agent. SIGNATURE Symbol types or printed marks of registered agent and time applicable. DATE OLITE 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 filled to change a general partner. 12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY DOCUMENT / NAME STREET ADDRESS CITY-ST-2P DOCUMENT / NAME STREET ADDRESS CITY-ST-									
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SIGNATURE: Bryan Weber 3-28-05 904-285-02	14. I hereby of indicated the received	on this report is true and accidinate and ver or trustee empowered to exacute the	n this filing does not qualify f I thay my signature shall havi is report as required by Cha	for the exe e the sam- apter 620,	emption stated in Se e legal effect as if r Florida Statutes	made under oath;	that I am a Genera	I further certify all Partner of the	that the information e limited partnership or