


**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2005**

FILED
May 16, 2005 08:00 AM
Secretary of State

| | | | |
|--|---------|---|---------|
| DOCUMENT # A99000000077 | |  | |
| 1. Entity Name TROPIC ISLE PARK, LTD. | | | |
| Principal Place of Business 5001 PHILLIPS HIGHWAY, 7-B JACKSONVILLE FL 32207 | | Mailing Address 5001 PHILLIPS HIGHWAY, 7-B JACKSONVILLE FL 32207 | |
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt #, etc. | | Suite, Apt #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |



1ST MOORE CR2E003 (10/04)

| | | | |
|---|--|--|--|
| 4. FEI Number 59-3551295 | | Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |

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|---|--|--|--|
| 6. Name and Address of Current Registered Agent HANSON, KARL B JR. C/O LEBOEUF, LAMB, GREENE & MACRAE, LLP 50 N. LAURA STREET, SUITE 2800 JACKSONVILLE FL 32202 | | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code | |
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|---|---|--|--|
| 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. | | 11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info. | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable | | DATE | |
| 9. Capital Contributions as Shown on record. \$525,000.00 | 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 # | 567608 | STREET ADDRESS | |
| NAME | PROPERTY PLANNING, INC. | CITY-ST-ZIP | |
| STREET ADDRESS | 5001 PHILLIPS HIGHWAY, 7-B | | |
| CITY-ST-ZIP | JACKSONVILLE FL 32207 | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
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| CITY-ST-ZIP | | | |

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05/16/05-80022-021 526.25

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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, the receiver or trustee empowered to file this report as required by Chapter 620, Florida Statutes.

SIGNATURE:  **A.T. Parsons, Jr.** **4-20-05** **904-737-1245**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE