

# 2005 LIMITED PARTNERSHIP ANNUAL REPORT

## Due By May 1, 2005

DOCUMENT # A99000000505

1. Entity Name

CAPSTONE BUILDERS OF SOUTHWEST FLORIDA, LTD.



FILED

2005 APR 25 PM 12:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

2100 TRADE CENTER WAY, SUITE D  
NAPLES, FL 34109

Mailing Address

2100 TRADE CENTER WAY, SUITE D  
NAPLES, FL 34109

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052005

Chg-LP

CR2E003 (10/03)

4. FEI Number

59-3575848

Applied For

Not Applicable

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

MUSUMANO, PATSY  
2100 TRADE CENTER WAY, SUITE D  
NAPLES, FL 34109

Name

KENT A SKRIVAN

Street Address (P.O. Box Number is Not Acceptable)

801 LAUREL OAK DRIVE

SUITE 705

City

NAPLES

FL

34108

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.

\$870,000.00

10. Amount of Capital Contributions  
in FLORIDA to date.

870,000

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

DOCUMENT # P99000027298  
NAME CAPSTONE DEVELOPERS OF S.W. FLA., INC.  
STREET ADDRESS 2100 TRADE CENTER WAY, SUITE D  
CITY- ST- ZIP NAPLES, FL 34109

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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DOCUMENT #  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY- ST- ZIP

STREET ADDRESS

CITY- ST- ZIP

STREET ADDRESS

CITY- ST- ZIP

STREET ADDRESS

CITY- ST- ZIP

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STREET ADDRESS

CITY- ST- ZIP

600054349196  
05/13/05--01003--016 \*\*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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1-13-05

239.594.7985