## 2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 7, 2005

			2005		_			
DOCUMENT # A9900000862  1. Entity Name SKM INVESTMENTS, LTD.					F11.ED 2005 HAY 13 P 2: 45			
Principal Place of Bus	siness	Mailing Address			7,000	) HAT IS	F 7. 40	
2916 SUNBITTERN ( WINDERMERE, FL 3	CT.	2916 SUNBITTERN CT. WINDERMERE, FL 34786		SECRETARY OF STATE (ALLAHASSEE, FLOAID).				
2. Principal Place of I	Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05022005	Chg-LP	CR2E003 (10/03)		
City & State		City & State		4. FEI Number 59-3579(	097	<del></del>	plied For t Applicable	
Zip	Country Zip		Country		5. Certificate of	Status Desired	S8.75 Add Fee Required	
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
O'SHAUGHNESSY, HUGH P JR.				Name				
2916 SUNBITTERN CT. WINDERMERE, FL 34786				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 the obligations of registered agent and title if applicable.  SIGNATURE  Signature based or printed name of registered agent and title if applicable.  DATE  10. Amount of Capital Contributions as Shown on record.  \$524,416.00  In accordance with s. 607.193(the limited partnership did not in the li							5-1-03 DATE	
	A GENERAL PARTNER TI	HAT IS A BUSINESS EN	M YTITY			TIVE WITH TH	IIS OFFICE.	
NOTE: General Partners MAY NOT be changed on th  12. GENERAL PARTNER INFORMATION			ne form	i; an amendmen	it must be filed	ADDRESS CH	•	
DOCUMENT /				TCY +ODDCCC	****	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
STREET ADDRESS 2916	AUGHNESSY, DIANE S SUNBITTERN CT. DERMERE, FL 34786			-ST-ZIP				
DOCUMENT /	AUGHNESSY, HUGH P JR.		STRI	EET ADDRESS				
STREET ADDRESS 2916	DRESS 2916 SUNBITTERN CT.			-ST-ZIP	300054491753 05713/0501011025 **2276.25			
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DOCUMENT # NAME CIBLET ADDRESS			STAI	EET ADORESS			5X J.	
STREET ADDRESS CITY-ST-ZIP				'-ST-ZIP			·	
14. I hereby certify the indicated on this the receiver or tru	nat the information supplied with report is true and accurate and ustee empowered to execute this	tnis thing does not qualify for that my signature shall have s report as required by Chap	or the exe the sam pter 620,		_		I further certify that the ir at Partner of the limited p	