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

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**SIGNAT** 

## Feb 22, 2005 08:00 AM DOCUMENT # A99000001268 **Secretary of State** TROPHY CLUB AT THE STRAND LIMITED PARTNERSHIP Principal Place of Business Mailing Address 4770 ALBERTON COURT 4770 ALBERTON COURT #2602 NAPLES FL 34105 NAPLES FL 34105 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1ST MOORE CR2E003 (10/04) 4. FEI Number Applied For City & State City & State 59-3590099 Not Applicable Zip Žip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BATEMAN, ARTHUR L Street Address (P.O. Box Number is Not Acceptable) 4770 ALBERTON COURT #2602 NAPLES FL 34105 City 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. 11. FILE NOW!!! Due by May 1, 2005. SIGNATURE. See Block 11 instructions for fee info. Signature, typed or printed name of registered agent and fille if applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions \$1,500,000.00 \$1,500,000.00 in FLORIDA to date as Shown on record. 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. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY 12 13. DOCUMENT# P99000051013 STREE: AUDRESS NAME TROPHY CLUB AT THE STRAND, INC. STREET ADDRESS 4770 ALBERTON COURT, #2602 CITY-ST-ZIP NAPLES FL 34105 CITY-ST-ZIP DOCUMENT A STREET ADDRESS NAME U00000239262 STREET ADDRESS UZ/22/05-80036-014 526.25 CITY-ST-7P CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY ST-ZIP DOCUMENT# STREET AUDRESS NAME STREET ADDRESS CITY-ST-7/P CHY-SI-7P DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CHY-SI-ZIP DOCUMENT # STREET ADDRESS MAME STREET ADDRESS CITY-ST-7IP CHY-ST-ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 execute this report as required by Chapter 620, Florida Statutes

**FILED**