

2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005


FILED

2005 MAY -2 P 4:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01052005 Chg-LP CR2E003 (10/03)

DOCUMENT # A99000001368					
1. Entity Name PALM VENTURE PARTNERS 1, LTD.					
Principal Place of Business 2704 HIBISCUS COURT PUNTA GORDA, FL 33950			Mailing Address P.O. DRAWER 511447 PUNTA GORDA, FL 33951-1447		
2. Principal Place of Business		3. Mailing Address 99 NESBIT STREET			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State PUNTA GORDA FL			
Zip	Country	Zip	Country	4. FEI Number 65-0942931	
33950		US		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent HACKETT, JACK O II ESQ 99 NESBIT ST. PUNTA GORDA, FL 33950			7. Name and Address of New Registered Agent Name 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, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$99,000.00		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 #	P990000072864		STREET ADDRESS		
NAME	PALM FLORIDA MANAGEMENT, INC.		CITY-ST-ZIP		
STREET ADDRESS	2704 HIBISCUS COURT				
CITY-ST-ZIP	PUNTA GORDA, FL 33950				
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CITY-ST-ZIP					
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: By <u>RICHARD D. PALMER</u> PALM FLORIDA MANAGEMENT, INC <u>4/28/05</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER					
RICHARD D. PALMER, PRESIDENT					

STAPLE CHECK HERE