


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

FILED
Feb 08, 2005 08:00 AM
Secretary of State

| | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|--|
| DOCUMENT # A99000001866 | | | |  | |
| 1. Entity Name THE HYATT FAMILY LIMITED PARTNERSHIP | | | | | |
| Principal Place of Business 300 S.E. 9TH COURT POMPANO BEACH FL 33060 | | | Mailing Address 300 S.E. 9TH COURT POMPANO BEACH FL 33060 | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | |
| City & State | | | City & State | | |
| Zip | Country | Zip | Country | 4. FEI Number 65-6321180 <input type="checkbox"/> 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 | | | | 7. Name and Address of New Registered Agent | |
| HYATT, GILBERT E III 300 S.E. 9TH COURT POMPANO BEACH FL 33060 | | | | 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small> | | | | 11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info. | |
| 9. Capital Contributions as Shown on record \$98,000.00 | | | | 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 # | NAME | | | STREET ADDRESS | |
| NAME | HYATT, GILBERT E III | | | CITY- ST- ZIP | |
| STREET ADDRESS | 300 S.E. 9TH COURT | | | | |
| CITY- ST- ZIP | POMPANO BEACH FL 33060 | | | | |
| DOCUMENT # | NAME | | | STREET ADDRESS | |
| NAME | HYATT, PATTI R | | | CITY- ST- ZIP | |
| STREET ADDRESS | 300 S.E. 9TH COURT | | | | |
| CITY- ST- ZIP | POMPANO BEACH FL 33060 | | | | |
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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: _____ | | | | 1-29-05 | |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> | | | | <small>Date</small> | |

STAPLE CHECK HERE