## 2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

## Jan 12, 2005 08:00 AM DOCUMENT # A9900001970 --Secretary of State THE NORTON INVESTMENT & MANAGEMENT GROUP, LTD. Principal Place of Business Mailing Address 1214 BRIGHTON WAY 1214 BRIGHTON WAY LAKELAND, FL 33813 LAKELAND, FL 33813 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. 01072005 Chg-LP CR2E003 (10/03) City & State City & State 4. FEI Number Applied For 59-3609743 Not Applicable Zip 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 NORTON, KELLY E Street Address (P.O. Box Number is Not Acceptable) 1214 BRIGHTON WAY LAKELAND, FL 33813 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. SIGNATURE Signature, typod or printed name of registered agent and tale if applicable DATE 9. Capital Contributions 10. Amount of Capital Contributions \$2,790,000.00 as Shown on record. 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. GENERAL PARTNER INFORMATION 12. ADDRESS CHANGES ONLY DOCUMENT # STREET ADDRESS NORTON, KELLY E NAME STREET ADDRESS 1214 BRIGHTON WAY CITY-ST-ZIP CITY-ST-ZIP LAKELAND, FL 33813 DOCUMENT # STREET ADDRESS U00000177864 NAME NORTON, DONNA W 01/12/05-80005-008 525.75 STREET ADDRESS 1214 BRIGHTON WAY CITY - ST - ZIP CITY-ST-ZIE LAKELAND, FL 33813 DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CiTY-ST-ZIP DOCHMENT # STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY -ST - ZIP CITY-ST-7IP

14. I hereby certify that the information supplied with this filling 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

**FILED** 

SIGNATURE:

오류였