2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

FILED Apr 18, 2005 08:00 AM Secretary of State

1. Entity Na	JMENT # A9900 ame NTURES, LTD.	0002130		Secretary of Sta
	F SHORE BLVD. NORTH	Mailing Address 5811 PELICAN BAY NAPLES, FL 34108	BLVD., #600	
2. Principa	l Place of Business	3. Mailing Address		
Suite, Ap	pt. #, etc.	Suite, Apt *, etc.		01042005 Chg-LP CR2E003 (10/03)
City & St	tate	Criy & State		4. FEI Number Applied For 59-3615340 Not Applied For
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Regulred
	6. Name and Address of	Current Registered Agent	Name	7. Name and Address of New Registered Agent
5811 PE	R WHITE BOGGS BAKEF LICAN BAY BLVD., STE.			s (P.O. Box Number is Not Acceptable)
NAPLES	, FL 34108			
		in the second se	City	FL Zip Code ered agent, or both, in the State of Florida. I am familiar with, and accer
SIGNATURE	Signature, typed or printed name of regis	45 Amount of Con	oital Contributions	DATE
	n on record. \$10,000,000	J.UU in FLORIDA to	date. \$10,000,00	00.00 STERED AND ACTIVE WITH THIS OFFICE.
	NOTE: General Partr	ners MAY NOT be changed on PARTNER INFORMATION	the form; an amendme	ent must be filed to change a general partner.
12.	P99000109133	PARTINER INFORMATION .	STREET ADDRESS	ADDRESS CHANGES ONLY
STREET ADDRESS CITY-ST-ZIP	ESP VENTUŘES, INC. 2341 GULF SHORE BLV NAPLES, FL 34103	D. NORTH	CITY-ST-ZIP	
DOCUMENT #			STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	5	·	CITY-ST-ZIP	<u> </u>
DOCUMENT #			STREET ADDRESS	
CITY-ST-ZIP		- <u> </u>	CITY-ST-ZIP 	
DOCUMENT #			STREET ADDRESS	<u> </u>
STREET ADDRESS CITY-ST-ZIP		<u> </u>	CITY-ST-ZIP	
DOCUMENT # NAME			STREET ADDRESS	
STREET ADDRESS CRY+ST-ZIP			CITY-ST-ZIP	
DOÇUMENT # NAME STREET ADDRESS			STREET ADDRESS	
CITY-ST-ZIP	cartify that the information curren	End with the City of the country of the	CITY-ST-ZIP	action 119 07/3V() Florida Statutos I further partifu that the information
14, I herehy		lied with this litted ones not allianto t		
14. I hereby indicated the recei	d on this report is true and accur wer or trustee empowered to exc	ate and that my signature shall have cute this report as required by Cha	e the same legal effect as it r pter 620, Florida Statutes	action 119.07(3)(i), Florida Statutes. I further certify that the information made under oath, that I am a General Partner of the limited partnership of the