


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
May 05, 2005 08:00 AM
Secretary of State

| | | | | | |
|---|--------------------------------|---------|--|--|--|
| DOCUMENT # B00000000341 1. Entity Name OKLAHOMA TAMPA LIMITED PARTNERSHIP | | | |  | |
| Principal Place of Business 380 UNION STREET WEST SPRINGFIELD, MA 01089 | | | Mailing Address 380 UNION STREET WEST SPRINGFIELD, MA 01089 | | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | | 3. Mailing Address Suite, Apt. #, etc. | | |
| City & State | | | City & State | | |
| Zip | | Country | | Zip | |
| Country | | Country | | 4. FEI Number 04-3535355 | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | | | Applied For Not Applicable | |
| 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 | | | | 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 file if applicable.</small> | | | | | |
| 9. Capital Contributions as Shown on record. \$3,000,000.00 | | | 10. Amount of Capital Contributions in FLORIDA to date. \$405,959.00 | | |
| 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 # | P34379 | | STREET ADDRESS | | |
| NAME | NEPSA PROPERTY INVESTORS, INC. | | CITY-ST-ZIP | UN00000362188 05/05/05-80102-013 526.25 | |
| STREET ADDRESS | 380 UNION STREET | | STREET ADDRESS | | |
| CITY-ST-ZIP | WEST SPRINGFIELD, MA 01089 | | CITY-ST-ZIP | | |
| DOCUMENT # | | | STREET ADDRESS | | |
| NAME | | | CITY-ST-ZIP | | |
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| CITY-ST-ZIP | | | 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)(f), 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: Jeremy Pava, Treasurer 4/21/05 (413) 439-6306
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE