2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2005

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

1. Entity Name	DENTON AUTO INVESTO		Secretary of State	
Principal Place of Business: 8901 SOUTH BOULEVARD CHARLOTTE, NC 28273		Mailing Address 8901 SOUTH BOUI CHARLOTTE, NC 2		
2. Principal Place of Business		3. Mailing Address		
Suite, Ap1 #, etc.		Suite, Apt. #, etc.		04052005 Chg-LP CR2E003 (10/03)
City & State		City & State		4. FEI Number Applied For 52-2253270 Not Applicable
Zlp	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
	6. Name and Address of Curre	nt Registered Agent	Name	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET			Street Address	(P.O. Box Number is Not Acceptable)
TALLAHASSEE, FL 32301-2525		<u>~</u>		
			City	FL Zip Code
	named entity submits this statement ons of registered agent.	for the purpose of changin	ng its registered office or registe	ered agent, or both, in the State of Florida I am familiar with, and accept
SIGNATURE -	Signature, typed of printed name of registered ag			DATE
9. Capital Contributions as Shown on record. \$1,450,000.00 10. Amount of Capital Contributions in FLORIDA to date.				
	A GENERAL PARTNER	THAT IS A BUSINESS	S ENTITY MUST BE REGIS	STERED AND ACTIVE WITH THIS OFFICE.
12.		IER INFORMATION	13.	ant must be filed to change a general partner. ADDRESS CHANGES ONLY
DOCUMENT /	F0000000 <u>6</u> 785 JLH BRADENTON, INC.	· - •	STREET ADDRESS	
STREET ADDRESS	8901 SOUTH BOULEVARD CHARLOTTE, NC 28273	<u> </u>	CITY-ST-ZIP	
DOCUMENT #			STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP			CHY-SI-ZIP	######################################
DOCUMENT # NAME		· · · · · · · · · · · · · · · · · · ·	STREET ADDRESS	
STREET ADDRESS CITY-ST-ZIP	-		CHY-ST-ZIP	
DOCUMENT # NAME		-	STREET ADDRESS	,
SIRLET ADDRESS		·	CITY-SI-ZIP	
CITY-ST ZIP DOCUMENT # NAME STRILLT ADDRESS	W . 11 1"		STREET ADDRESS	
	-		CITY - ST-ZIP	
DOCUMENT #	7.12.12.1		STREET ADDRESS	
STREET ADDRESS CITY ST-ZIP			CITY - ST - ZIP	
hotestad	certify that the information supplied v on this report is true and accurate a ver or trustee empowered to execute	nd that my šionature shall l	have the same legal effect as if	Section 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 or
SIGNATURE: UNDIVINE AND TYPED OR PHATED YAME OF PHA				