
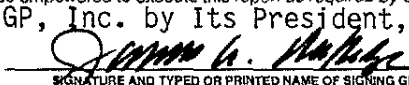


2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

FILED
May 06, 2005 08:00 AM
Secretary of State

DOCUMENT # B01000000197 1. Entity Name ANCHORAGE PROPERTIES LIMITED					
Principal Place of Business 100 SOUTH THIRD STREET COLUMBUS, OH 43215			Mailing Address 100 SOUTH THIRD STREET COLUMBUS, OH 43215		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt #, etc.		Suite, Apt #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
		04252005 Chg-LP		CR2E003 (10/03)	
4. FEI Number 31-1725430				<input type="checkbox"/> Applied For <input type="checkbox"/> 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		
KRINER, DEBORAH L 1201 US HIGHWAY ONE, SUITE 350A NORTH PALM BEACH, FL 33408			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 title if applicable</small>					
9. Capital Contributions as Shown on record. \$1,350,000.00		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 #	P00000078894		STREET ADDRESS		
NAME	ANCHORAGE G.P., INC.		CITY-ST-ZIP		
STREET ADDRESS	100 SOUTH THIRD STREET				
CITY-ST-ZIP	COLUMBUS, OH 43215				
DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
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NAME			CITY-ST-ZIP		
STREET ADDRESS					
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.					
Anchorage GP, Inc. by Its President, James A. Rutledge					
SIGNATURE: 			4-27-05 (614) 227-2300 <small>Date Daytime Phone #</small>		

STAPLE CHECK HERE