2005 LIMITED PARTNERSHIP ANNUAL REPORT Due By_September 7, 2005

Due By-September 7, 2005									F	li en		
DOCU 1. Entity Nam REMING				SECRETARY OF STATE DIVISION OF CORPORATIONS 05 SEP -6 AH 9: 49								
DALLAS, TX	AS PARKWAY 75254	/, 9TH FLOOR	Mailing Address 14180 DALLAS PARKWAY, 9TH FLOOR DALLAS, TX 75254									
2. Principal Place of Business 14185 Dallas Parkway Suite, Apt. #, etc.			3. Mailing Address 14185 Dallas Parkway Suite, Apt. #, etc.			ay	06162005	## #	-LP	44 BB BB	003 (10/	
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Dallas 77 Zip Country			Dallas TX Zip Country				20-	611	155.			Not Applicable
75254	54		75254		iuy		5. Certificate	of Statu:	s Desired		\$8.75 Fee Req	Additional puired
	6. Name	and Address of Current	Registered Agent		1		7. Name and	Addres	s of New R	egistered /	Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525					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	Signature, typed				DATE							
9. Capital Co as Shown		butions										
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.	NOTE.		i, an ame	numen	t must be the		DRESS CHA					
12. GENERAL PARTNER INFORMATION 13. DOCUMENT / M04000001106												
NAME	ļ	ON LODGING & HOSF	ITALITY, LLC FLOOR		EET ADDRESS	1418	35 Dall	as 1	PKWY	yste.	. {(50	r
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14. I hereby certify that the information supplied with this filing 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 of the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes												

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER BEAUCH \$ 1605 972-778-9271

SIGNATURE: ___