2005 LIMITED PARTNERSHIP ANNUAL REPORT

	Due By N				
1. Entity Nam	MENT # B04000000			SECRETARY OF STATE DIVISION OF CORPORATIONS 05 APR - 1 AM 10: 42	
Principal Place of Business 1100 NORTHLAKEWAY PALMBEACH FL 33480		Mailing Address 1100 NORTH LAKE WAY PALMBEAOH, FL 33480			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02242005 Chg-LP CR2E003 (10/03)	
City & State		City & State		4. FEI Number 20 - 1913189 Applied For Not Applicable	
Zip	- Country	— Zip— ···	Country -	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Current F	Registered Agent		7. Name and Address of New Registered Agent	
STANTON, DANIEL W 1100 NORTH LAKE WAY PALM BEACH, FL 33480		Street Add			
			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 DANIEL W. STANTON 3/14/05					
9. Capital Contributions as Shown on record \$1,000,000.00 10. Amount of Capital Contributions in FLORIDA to date				DATE	
as Shown on record. \$1,000,000.00 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 12. GENERAL PARTNER INFORMATION 13			e form; an amen	endment must be filed to change a general partner. ADDRESS CHANGES ONLY	
	WEITER TO CONTINUE	5/10/1/10/1		ADDITION OF MINDER ONLY	
DOCUMENT # NAME	STANTON, DANIEL W		STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	1100 NORTH LAKE WAY	H LAKE WAY		900050092059 04/07/0501004005 **526.25	
DOCUMENT #	ALM BEACH, FL 33480		STREET ADDRESS		
NAME STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		
DOCUMENT #			STREET ADDRESS		
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NAME STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filling 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

STAPLE CHECK HERE