


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
Mar 23, 2005 08:00 AM
Secretary of State

DOCUMENT # B93000000063		
1. Entity Name ERMC, L.P. (LIMITED)		

Principal Place of Business 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324	Mailing Address 6148 LEE HWY., STE. 300 CHATTANOOGA, TN 37421
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt #, etc.		Suite, Apt #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



03112005 Chg-LP CR2E003 (10/03)

4. FEI Number 62-1508099		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 CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____
Signature, typed or printed name of registered agent and date if applicable

9. Capital Contributions as Shown on record. \$99.00	10. Amount of Capital Contributions in FLORIDA to date. \$141.25
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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 #	F93000000831	STREET ADDRESS	
NAME	RUSSELL SECURITY CO., INC.	CITY-ST-ZIP	11110000273705 03/23/05-80039-010 141.25
STREET ADDRESS	6148 LEE HWY., STE. 300		
CITY-ST-ZIP	CHATTANOOGA, TN 37421		
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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.

SIGNATURE: Emerson E. Russell 3/15/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE