


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR 17 AM 10:55

DOCUMENT # B93000000182					
1. Entity Name SHOOSTER INVESTMENT ASSOCIATES OF FLORIDA, LTD.					
Principal Place of Business 2900 W. SAMPLE ROAD POMPAÑO BEACH, FL 33073			Mailing Address 2900 W. SAMPLE ROAD POMPAÑO BEACH, FL 33073		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 23-2535226	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SHOOSTER MANAGEMENT, INC. 2900 W. SAMPLE ROAD POMPAÑO BEACH, FL 33073			7. Name and Address of New Registered Agent Name Valdes-Fauli Corporate Services, Inc. Street Address (P.O. Box Number is Not Acceptable) 500 E. Broward Blvd., Suite 1400 City Ft. Lauderdale FL Zip Code 33394		
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 <u>Martin R. Press, Esq., Vice President</u> 3/16/05 Signature, typed or printed name of registered agent and title if applicable. DATE					
9. Capital Contributions as Shown on record. \$0.00			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 #	B00000000394		STREET ADDRESS		
NAME	HOSTABIDDABLE ASSOCIATES, L.P.		CITY-ST-ZIP		
STREET ADDRESS	2900 W. SAMPLE ROAD				
CITY-ST-ZIP	POMPAÑO BEACH, FL 33073				
DOCUMENT #			STREET ADDRESS	400049167514	
NAME			CITY-ST-ZIP	03/25/05--01005--008 **150.00	
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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)(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 or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes					
SIGNATURE: <u>[Signature]</u>			2-25-05 (954) 979-4555		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			Date Daytime Phone #		
Daniel H. Shooster, COO of Shooster Mngt., Inc. General Partner of					

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