


**2005 LIMITED PARTNERSHIP ANNUAL REPORT (AR)**  
**DUE BY MAY 1, 2005**

|  |   |
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| <b>DOCUMENT # B96000000292</b>   |  |
| 1. Entity Name<br><b>CHARLOTTE GOLF MANAGEMENT LIMITED PARTNERSHIP</b> |   |

FILED

2005 APR 25 PM 12: 21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



|  |  |
|--|--|
| Principal Place of Business<br><b>22 SUNNINGDALE DR.<br/>GROSSE POINTE SHORES MI 48236</b> | Mailing Address<br><b>22 SUNNINGDALE DR.<br/>GROSSE POINTE SHORES MI 48236</b> |
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|                                |                     |
|--------------------------------|---------------------|
| 2. Principal Place of Business | 3. Mailing Address  |
| Suite, Apt. #, etc.            | Suite, Apt. #, etc. |
| City & State                   | City & State        |
| Zip                            | Country             |

1ST MOORE CR2E003 (10/04)

|   |  |
|---|--|
| 4. FEI Number<br><b>38-3306355</b>  | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> |  |

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| 6. Name and Address of Current Registered Agent<br><br><b>ORR, BRUCE A<br/>175 KINGS HIGHWAY<br/>PORT CHARLOTTE FL 33983</b> | 7. Name and Address of New Registered Agent<br>Name<br><b>BRUCE A. ORR</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>702 COUNTRY CLUB DRIVE</b><br>City<br><b>LARGO</b> FL Zip Code<br><b>33771</b> |
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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.<br>SIGNATURE <u><i>BRUCE A. ORR</i></u> DATE <u><i>MARCH 28, 2005</i></u><br><small>Signature, typed or printed name of registered agent and title if applicable</small> |   | 11. FILE NOW!!! Due by May 1, 2005.<br>See Block 11 instructions for fee info. |
| 9. Capital Contributions as Shown on record. <b>\$200.00</b>   | 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 #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>F96000003796<br/>CHARLOTTE GOLF MANAGEMENT COMPANY, INC.<br/>22 SUNNINGDALE LANE<br/>GROSSE POINTE SHORES MI 48236</b> | STREET ADDRESS<br>CITY-ST-ZIP | <b>200054345662<br/>05/12/05--01082--021 **141.25</b> |
| DOCUMENT #<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | STREET ADDRESS<br>CITY-ST-ZIP |   |
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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 or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

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| SIGNATURE: <u><i>Wendy Williams</i></u> <b>WENDY WILLIAMS</b><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> | <u><i>4/1/05</i></u> <b>3133430498</b><br><small>Date Daytime Phone #</small> |
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STAPLE CHECK HERE