

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2005**

**FILED**  
05 APR 14 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # B97000000351

1. Entity Name  
HMTF FUND I PARTNERS, L.P.



Principal Place of Business  
5080 SPECTRUM DRIVE, SUITE 1050-E  
ADDISON, TX 75001

Mailing Address  
5080 SPECTRUM DRIVE, SUITE 1050-E  
ADDISON, TX 75001

BK



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04072005 Chg-LP CR2E003 (10/03)

City & State

City & State

4. FEI Number

75-2640297

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

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 or printed name of registered agent and title if applicable.

DATE

9. Capital Contributions  
as Shown on record.

\$2,901,690.00

10. Amount of Capital Contributions  
in FLORIDA to date.

\$2,901,690.00

**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

DOCUMENT # F97000003678  
NAME HMTF/OLYMPUS GP, INC.  
STREET ADDRESS 5080 SPECTRUM DRIVE, SUITE 1050-E  
CITY-ST-ZIP ADDISON, TX 75001

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

700051413647  
04/20/05 01000 021 \*\*526.25

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: SEE ATTACHED SIGNATURE ADDENDUM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-8-05 972-980-2200

Date

Daytime Phone #

STAPLE CHECK HERE

1397000000351

SIGNATURE ADDENDUM  
TO

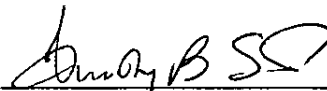
2005 Limited Partnership Annual Report – FL

DATED April 8, 2005

FILED  
05 APR 14 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

HMTFD FUND I PARTNERS, L.P.,  
a Texas limited partnership

By: HMTF/Olympus GP, Inc.,  
a Texas corporation,  
its general partner

By:   
Name: Timothy B. Smith  
Title: Vice President & Secretary