


2005 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2005

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR 31 AM 8:16

DOCUMENT # B97000000480 1. Entity Name PARKSIDE CLEARWATER ASSOCIATES, L.P.					
Principal Place of Business % ALLEN WEBER 2525 PALMER AVENUE NEW ROCHELLE, NY 10801			Mailing Address % ALLEN WEBER 2525 PALMER AVENUE NEW ROCHELLE, NY 10801		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		03172005 Chg-LP CR2E003 (10/03)	
4. FEI Number 13-3960075				<input type="checkbox"/> 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 NEWMARK, LESLIE 6010 N.W. 23RD TERRACE BOCA RATON, FL 33496				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. \$600,000.00			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 #	M97000000594		STREET ADDRESS		
NAME	SPAW REALTORS, LLC		CITY-ST-ZIP		
STREET ADDRESS	2525 PALMER AVENUE- ALLEN WEBER		STREET ADDRESS		
CITY-ST-ZIP	NEW ROCHELLE, NY 10801		CITY-ST-ZIP		
DOCUMENT #			STREET ADDRESS		
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CITY-ST-ZIP			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: SPAW REALTORS, LLC ALLEN WEBER, PARTNER SPAW Realtors, LLC, A. Weber Partner 3/25/05					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #					

STAPLE CHECK HERE

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