

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

FILED

2005 MAY -6 PM 12: 54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



<b>DOCUMENT # B98000000142</b> 1. Entity Name <b>W9/TGR REAL ESTATE LIMITED PARTNERSHIP</b>					
Principal Place of Business <b>600 E LAS COLINAS BLVD, SUITE 400          IRVING, TX 75039</b>				Mailing Address <b>600 E LAS COLINAS BLVD, SUITE 400          IRVING, TX 75039</b>	
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 <b>75-2735128</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>C T CORPORATION SYSTEM          1200 SOUTH PINE ISLAND ROAD          PLANTATION, FL 33324</b>				Name  Street Address (P.O. Box Number is Not Acceptable)  City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
9. Capital Contributions as Shown on record. <b>\$20,000,000.00</b>		10. Amount of Capital Contributions in FLORIDA to date.		<b>\$20,000,000.00</b>	
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	<b>M99000000604</b>		STREET ADDRESS	<b>180 Maiden Lane, 40th Floor</b>	
NAME	<b>W9/TGR GEN-PAR, L.L.C.</b>		CITY-ST-ZIP	<b>New York, NY 10038-4958</b>	
STREET ADDRESS	<b>10 HANOVER SQUARE, 17TH FLOOR</b>		<div style="font-size: 1.2em;">300055803673</div> <div style="font-size: 0.8em;">06/06/05 01002 006 **5067.50</div> <div style="font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">\$526.25</div>		
CITY-ST-ZIP	<b>NEW YORK, NY 10005</b>				
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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					
SIGNATURE: <i>R.K. Bayer</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			Assistant Secretary of General Partner <small>Date Daytime Phone #</small>		

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