

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

<b>DOCUMENT # B98000000647</b> 1. Entity Name <b>SUNDANCE-TURTLE CREEK LIMITED PARTNERSHIP</b>	
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Principal Place of Business <b>10200 W FISHBOWL DRIVE HOMOSASSA SPRINGS FL 34448</b>	Mailing Address <b>400 W. MAPLE SUITE 250 BIRMINGHAM AL 48009</b>
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2. Principal Place of Business <b>27777 FRANKLIN RD.</b> Suite, Apt. #, etc. <b>STE 200</b> City & State <b>SOUTHFIELD, MI</b> Zip <b>48034</b>	3. Mailing Address <b>27777 FRANKLIN RD.</b> Suite, Apt. #, etc. <b>STE 200</b> City & State <b>SOUTHFIELD, MI</b> Zip <b>48034</b>
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2005 APR 18 PM 1:19  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



1ST MOORE CR2E003 (10/04)


4. FEI Number <b>38-3440909</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>BARTON, ROBERT E 10200 W. FISHBOWL DRIVE HOMOSASSA FL 34448</b>	
7. Name and Address of New Registered Agent 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.		11. FILE NOW!!! Due by May 1, 2005. See Block 11 instructions for fee info.
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE _____	
9. Capital Contributions as Shown on record. <b>\$600,000.00</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 # NAME STREET ADDRESS CITY-ST-ZIP <b>BAYER, ROBERT B 400 WEST MAPLE, SUITE 250 BIRMINGHAM MI 48009</b>	STREET ADDRESS CITY-ST-ZIP <b>27777 Franklin Rd, Ste 200 Southfield, MI 48034</b>
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STAPLE CHECK HERE

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	
<b>SIGNATURE:</b>  <b>Daniel J. Bayer</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>	4/11/05 Date 248-208-2530 Daytime Phone #