


**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)  
DUE BY MAY 1, 2006**

**FILED  
Feb 23, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # A0000001249**  
1. Entity Name  
**BRONSON ENTERPRISES, LLLP**



Principal Place of Business: **2200 OLD VINELAND ROAD, KISSIMMEE FL 34746**  
Mailing Address: **2200 OLD VINELAND ROAD, KISSIMMEE FL 34746**



2. Principal Place of Business: Suite, Apt. #, etc. City & State Zip Country  
3. Mailing Address: Suite, Apt. #, etc. City & State Zip Country

1st MOORE CR2E003 (10/05)

6. Name and Address of Current Registered Agent  
**BRONSON, JOHN W  
2200 OLD VINELAND ROAD  
KISSIMMEE FL 34746**

4. FEI Number: **59-7187610** Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent  
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: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and filer if applicable.

**FILE NOW!!! Fee is \$500. \*\*\* After May 1, 2006, fee will be \$900. \*\*\* Make check payable to Florida Department of State.**

**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	
	BRONSON, JOHN W TRUSTEE		
STREET ADDRESS	2200 OLD VINELAND ROAD	CITY-ST-ZIP	
	KISSIMMEE FL 34746		
DOCUMENT #	NAME	STREET ADDRESS	
	BRONSON, EVELYN D TRUSTEE		
STREET ADDRESS	2200 OLD VINELAND ROAD	CITY-ST-ZIP	
	KISSIMMEE FL 34746		
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STREET ADDRESS		CITY-ST-ZIP	

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: John W Bronson John W. BRONSON Gen Part.  
407-396-2191