

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 08, 2006 08:00 AM
Secretary of State

DOCUMENT # A01000000857 1. Entity Name MCMAHON FAMILY LIMITED PARTNERSHIP	
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Principal Place of Business
**625 COURT STREET
CLEARWATER, FL 33756**

Mailing Address
**625 COURT STREET
CLEARWATER, FL 33756**



02222006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 03-0395561	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**NASH, THOMAS C
625 COURT STREET
CLEARWATER, FL 33756**

**DO NOT WRITE
IN THIS SPACE**

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 _____

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

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 #	
NAME	MCMAHON HOLDINGS, LLC
STREET ADDRESS	625 COURT STREET
CITY - ST - ZIP	CLEARWATER, FL 33756

DOCUMENT #	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

DOCUMENT #	
NAME	
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NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000000459235
03/18/06-80025-003 500.00

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/6/06

Date

727-797-8806

Daytime Phone #

STAPLE CHECK HERE