


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # A02000000089
 1. Entity Name
CARRON FAMILY LIMITED PARTNERSHIP



Principal Place of Business Mailing Address
233 W. WATERS AVE. **233 W. WATERS AVE.**
TAMPA, FL 33604 **TAMPA, FL 33604**



01042006 No Chg-LP CRZE003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number: **03-0379827** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
LEFLOCH, EUGENE M ESQ
1311 N. WESTSHORE BLVD.
SUITE 205
TAMPA, FL 33607

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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 title if applicable.

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 | CARRON, LOUIS J SR. |
| STREET ADDRESS | 17125 ORANGEWOOD DRIVE |
| CITY-ST-ZIP | LUTZ, FL 33548 |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| DOCUMENT # | |
| NAME | |
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| 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: *Louis J. Carron* **LOUIS J. CARRON** 01/10/06 813 933-7861
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #