


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # A02000000135

1. Entity Name
THE DOZIER B. HILLIARD FAMILY LIMITED PARTNERSHIP



Principal Place of Business
**4406 RIVERVIEW BLVD. WEST
 BRADENTON, FL 34209**

Mailing Address
**4406 RIVERVIEW BLVD. WEST
 BRADENTON, FL 34209**

DO NOT WRITE IN THIS SPACE



04052006 No Chg-LP CR2E003 (11/05)

4. FEI Number
90-0005496 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**HILLIARD, DOZIER B
 4406 RIVERVIEW BLVD. WEST
 BRADENTON, FL 34209**

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 _____ 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 #	P02000005012
NAME	THE HILLIARD GROUP, INC.
STREET ADDRESS	4406 RIVERVIEW BLVD. WEST
CITY-ST-ZIP	BRADENTON, FL 34209
DOCUMENT #	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

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000000505888
 04/26/06-80134-DIS 500.00

STAPLE CHECK HERE

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: *E. B. Hilliard* 4/8/06 (941) 746-4233

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #