


**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**Mar 27, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A03000000671**

1. Entity Name  
**3RD AVENUE ASSOCIATES, L.L.P.**



Principal Place of Business      Mailing Address  
**240 S. PINEAPPLE AVENUE, 10TH FLOOR**      **240 S. PINEAPPLE AVENUE, 10TH FLOOR**  
**SARASOTA, FL 34236**      **SARASOTA, FL 34236**

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country



03062006      Chg-LP      CR2E003 (11/05)

4. FEI Number      Applied For  
**45-0513657**      Not Applicable

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

6. Name and Address of Current Registered Agent      7. Name and Address of New Registered Agent

**BAND, DAVID**      Name  
**240 S. PINEAPPLE AVENUE, 10TH FLOOR**      Street Address (P.O. Box Number is Not Acceptable)  
**SARASOTA, FL 34236**      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 \_\_\_\_\_  
Sign as, 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		13. ADDRESS CHANGES ONLY	
DOCUMENT #		STREET ADDRESS	
NAME	<b>BAND, DAVID S</b>	CITY-ST-ZIP	
STREET ADDRESS	<b>240 S. PINEAPPLE AVENUE, 10TH FLOOR</b>		
CITY-ST-ZIP	<b>SARASOTA, FL 34236</b>		
DOCUMENT #		STREET ADDRESS	
NAME	<b>MCILAY, JOHN M</b>	CITY-ST-ZIP	
STREET ADDRESS	<b>100 3RD AVE. WEST, SUITE 600</b>		
CITY-ST-ZIP	<b>BRADENTON, FL 34205</b>		
DOCUMENT #		STREET ADDRESS	
NAME	<b>ALLIN, RONALD J</b>	CITY-ST-ZIP	
STREET ADDRESS	<b>1001 3RD AVE. WEST, SUITE 600</b>		
CITY-ST-ZIP	<b>BRADENTON, FL 34205</b>		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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STREET ADDRESS			
CITY-ST-ZIP			

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04/11/06-80000-016-500.00

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 820, Florida Statutes

SIGNATURE David S. Band      **David S. Band, Gen Ptr**      **3/15/06**

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