

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

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

|                                                 |  |                                                                                   |
|-------------------------------------------------|--|-----------------------------------------------------------------------------------|
| <b>DOCUMENT # A04000000004</b>                  |  |  |
| 1. Entity Name<br><b>REECO PROPERTIES, LLLP</b> |  |                                                                                   |

|                                                                                    |                                                                        |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------|
| Principal Place of Business<br><b>561 VIRGINIA AVENUE<br/>WINTER PARK FL 32789</b> | Mailing Address<br><b>561 VIRGINIA AVENUE<br/>WINTER PARK FL 32789</b> |
|------------------------------------------------------------------------------------|------------------------------------------------------------------------|

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



1st MOORE CR2E003 (10/05)

|                                    |                               |
|------------------------------------|-------------------------------|
| 4. FEI Number<br><b>20-0553531</b> | Applied For<br>Not Applicable |
|------------------------------------|-------------------------------|

|                                                           |                                       |
|-----------------------------------------------------------|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75 Additional Fee Required</b> |
|-----------------------------------------------------------|---------------------------------------|

|                                                                                   |  |
|-----------------------------------------------------------------------------------|--|
| 6. Name and Address of Current Registered Agent                                   |  |
| <b>MURRAH, KENNETH F<br/>800 W. MORSE BLVD., SUITE 1<br/>WINTER PARK FL 32789</b> |  |

|                                                    |             |
|----------------------------------------------------|-------------|
| 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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

DATE \_\_\_\_\_

**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           |  |
| STREET ADDRESS                  | RECEE, WAYNE P                              | CITY-ST-ZIP              |  |
| CITY-ST-ZIP                     | 561 VIRGINIA AVENUE<br>WINTER PARK FL 32789 |                          |  |
| DOCUMENT #                      | NAME                                        | STREET ADDRESS           |  |
| STREET ADDRESS                  | RECEE, DIANE A                              | CITY-ST-ZIP              |  |
| CITY-ST-ZIP                     | 561 VIRGINIA AVENUE<br>WINTER PARK FL 32789 |                          |  |
| DOCUMENT #                      | NAME                                        | STREET ADDRESS           |  |
| STREET ADDRESS                  |                                             | CITY-ST-ZIP              |  |
| CITY-ST-ZIP                     |                                             |                          |  |
| DOCUMENT #                      | NAME                                        | STREET ADDRESS           |  |
| STREET ADDRESS                  |                                             | CITY-ST-ZIP              |  |
| CITY-ST-ZIP                     |                                             |                          |  |
| DOCUMENT #                      | NAME                                        | STREET ADDRESS           |  |
| STREET ADDRESS                  |                                             | CITY-ST-ZIP              |  |
| CITY-ST-ZIP                     |                                             |                          |  |
| DOCUMENT #                      | NAME                                        | STREET ADDRESS           |  |
| STREET ADDRESS                  |                                             | CITY-ST-ZIP              |  |
| CITY-ST-ZIP                     |                                             |                          |  |

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02/13/06-80062-002 500.00

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 it 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: *Wayne P. Reece* WAYNE P. REECE 1/23/06