

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A04000001632

1. Entity Name
SA FLA I LTD.



Principal Place of Business
**350 CAMINO GARDENS BLVD., #102
BOCA RATON, FL 33432**

Mailing Address
**350 CAMINO GARDENS BLVD., #102
BOCA RATON, FL 33432**

FILED

06 MAY -1 PM 12:30

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**



04102006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-1787154 65-1103999

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ADAMS, SCOTT H
350 CAMINO GARDNES BLVD., #102
BOCA RATON, FL 33432**

**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 # **P04000117747**
NAME **SA FLA I INC.**
STREET ADDRESS **350 CAMINO GARDENS BLVD., #102**
CITY-ST-ZIP **BOCA RATON, FL 33432**

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**700075016237
05/22/06--01017--002 **500.00**

**DO NOT WRITE
IN THIS SPACE**

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:

Scott H. Adams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4/26/06
Date

561-347-5388
Daytime Phone #

Scott H. Adams, President