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

DOCUMENT # A05000002189

1. Entity Name
OLEO ACRES, LLLP

06 FEB 20 AM 8:51

| Principal Place of Business | Mailing Address |
|---|---|
| 2008 COUNTRY CLUB DRIVE<br>EUSTIS, FL 32726 | 2008 COUNTRY CLUB DRIVE<br>EUSTIS, FL 32726 |

02142006 Chg-LP CR2E003 (11/05)

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | PO Box 1236<br>Suite, Apt. #, etc. |
| City & State | City & State: Eustis FL |
| Zip / Country | Zip: 32727 / Country |

4. FEI Number: 20-3931143 ☐ Applied For ☐ 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 |
|---|---|
| NORRIS, GAIL L<br>2008 COUNTRY CLUB DRIVE<br>EUSTIS, FL 32726 | Name: Charles E. Norris II<br>Street Address (P.O. Box Number is Not Acceptable): 20650 CR 46A<br>City: Sorrento **FL** Zip Code: 32776 |

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] Charles Norris II 2-14-06
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 | | 13. ADDRESS CHANGES ONLY | |
|---|---|---|---|
| DOCUMENT # | | STREET ADDRESS | |
| NAME | NORRIS, CHARLES E II | CITY-ST-ZIP | |
| STREET ADDRESS | 20650 CR 46A CLUB DRIVE | | |
| CITY-ST-ZIP | SORRENTO, FL 32776 | | |
| DOCUMENT # | | STREET ADDRESS | 800066803105<br>02/28/06--01019--024 **500.00 |
| NAME | NORRIS, STEPHANIE L | CITY-ST-ZIP | |
| STREET ADDRESS | 3609 CONSTANCE | | |
| CITY-ST-ZIP | NEW ORLEANS, LA 70115 | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | NORRIS, ROBERT E | CITY-ST-ZIP | |
| STREET ADDRESS | 2008 COUNTRY CLUB DRIVE | | |
| CITY-ST-ZIP | EUSTIS, FL 32726 | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
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| NAME | | CITY-ST-ZIP | |
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| CITY-ST-ZIP | | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |

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:** [signature] 2-14-06 352-551-7998
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #