


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

06 MAY -1 AM 9:38
 SECRETARY OF STATE
 TALLAHASSEE FLORIDA

DOCUMENT # A18003	
1. Entity Name BATTAGLIA PROPERTIES, LLLP	

Principal Place of Business 250 SOUTH PARK AVENUE, SUITE 630 WINTER PARK, FL 32789	Mailing Address P.O. BOX 3010 WINTER PARK, FL 32790-3010
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2. Principal Place of Business 250 Park Avenue South	3. Mailing Address
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Suite, Apt. #, etc. Suite 630	Suite, Apt. #, etc.
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City & State Winter Park, FL	City & State
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Zip 32789	Country	Zip	Country
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04122006 Chg-LP CR2E003 (11/05)

4. FEI Number 59-2153160	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
BATTAGLIA, WP 250 SOUTH PARK AVENUE, SUITE 630 WINTER PARK, FL 32789	
<i>WP Battaglia</i>	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable) 250 Park Avenue South	
Suite 630	
City Winter Park	FL Zip Code 32789

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 <i>04/24/06</i>
<small>Signature, typed or printed name of registered agent and title if applicable.</small>	

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 # NAME STREET ADDRESS CITY - ST - ZIP	336201 BATTAGLIA FRUIT CO., INC P.O. BOX 3010UE SOUTH, STE. 630 WINTER PARK, FL 32789	STREET ADDRESS CITY - ST - ZIP	250 Park Avenue South, Ste. 630 Winter Park, FL 32789
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 05/15/06--01048--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 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: <i>WP Battaglia</i>	W.P. Battaglia	<i>04/24/06</i>	407-622-1700
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>		<small>Date</small>	<small>Daytime Phone #</small>