


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

**FILED**  
**Apr 19, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # A25722 1. Entity Name BOCA RIO CENTRE, LTD.	
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Principal Place of Business 7777 GLADES ROAD SUITE 310 BOCA RATON, FL 33434	Mailing Address 7777 GLADES ROAD SUITE 310 BOCA RATON, FL 33434
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01172006 No Chg-LP CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0205258	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  SCHMIER, ROBERT J 7777 GLADES ROAD SUITE 310 BOCA RATON, FL 33434
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**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

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2006, Fee will be \$900.00**

DATE  
000000519518  
05/02/06-80056-012 508.75

**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 # NAME STREET ADDRESS CITY-ST-ZIP	K10175 S.F.A., INC. 7777 GLADES ROAD, #310 BOCA RATON, FL
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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: *Robert J. Schmier*      4.13.04      561/483-8400  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER      Date      Daytime Phone #

Robert J. Schmier, Pres.