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

**FILED**
**Apr 27, 2006 08:00 AM**
**Secretary of State**

DOCUMENT # A32317

1. Entity Name
GOLF VILLAS ASSOCIATES LIMITED PARTNERSHIP

| Principal Place of Business | Mailing Address |
|---|---|
| 7900 MIAMI LAKES DRIVE WEST<br>MIAMI LAKES, FL 33016-5897 | 7900 MIAMI LAKES DRIVE WEST<br>MIAMI LAKES, FL 33016-5897 |

**DO NOT WRITE IN THIS SPACE**

04202006 No Chg-LP CR2E003 (11/05)

4. FEI Number
65-0299280
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

RODRIGUEZ, CHRISTY
7900 MIAMI LAKES DRIVE WEST
MIAMI LAKES, FL 33016-5897

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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
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**

100003538852
04/09/06-80071-023 500.00

**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 # | S68588 |
| NAME | KISLAK REALTY EQUIT.,INC |
| STREET ADDRESS | 7900 MIAMI LAKES DR. W. |
| CITY-ST-ZIP | MIAMI LAKES, FL |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| DOCUMENT # | |
| NAME | |
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| STREET ADDRESS | |
| CITY-ST-ZIP | |

**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:** Christy Rodriguez, VP 4/24/2006 305-364-4101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

Christy Rodriguez, VP