


**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006**

**FILED
Apr 24, 2006 08:00 AM
Secretary of State**

DOCUMENT # A9500000691
1. Entity Name
DOONER FAMILY EQUITIES, LTD.



Principal Place of Business: **1010 5TH AVENUE SOUTH, SUITE 300
NAPLES FL 34102**
Mailing Address: **P.O. BOX 7369
NAPLES FL 34101**



2. Principal Place of Business: Suite, Apt. #, etc.
3. Mailing Address: Suite, Apt. #, etc.
City & State
Zip Country

1st MOORE CR2E003 (10/05)

6. Name and Address of Current Registered Agent
**DOONER, EUGENE C
5386 SYCAMORE DR.
NAPLES FL 34119**

4. FEI Number: **65-0597596**
Applied For: Not Applied
5. Certificate of Status Desired: \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
Name: _____
Street Address (P.O. Box Number is Not Acceptable): _____
City: _____ FL Zip Code: _____

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.

FILE NOW!!! Fee is \$500. * After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.**

**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 #	P95000029954	STREET ADDRESS	
NAME	DOONER MANAGEMENT, INC.	CITY-ST-ZIP	
STREET ADDRESS	1010 5TH AVENUE SOUTH, SUITE 300		
CITY-ST-ZIP	NAPLES FL 34102		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			U00000532858
CITY-ST-ZIP			05/06/06-80097-017 500.00
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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

Dooner Management, Inc
SIGNATURE: BY: Eugene C. Dooner, Eugene C. Dooner, President 239-643-4211
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #