

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

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

**DOCUMENT # A95000002018**

1. Entity Name  
**FLORIDA RESORT MANAGEMENT, LTD.**



Principal Place of Business

**1677 COLLINS AVENUE  
MIAMI, FL 33139**

Mailing Address

**C/O MILLER & WEBNER, P.A.  
P.O. BOX 266947  
WESTON, FL 33326-6947**



02222006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0649560**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**MILLER, REBECCA M ESQ.  
C/O MILLER & WEBNER, P.A.  
2442 POINCIANA COURT  
WESTON, FL 33327**

**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

DATE

**000000537966**  
**05/09/06-80039-014 500.00**

**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

DOCUMENT # **P95000096194**  
NAME **FLORIDA RESORT, INC.**  
STREET ADDRESS **1677 COLLINS AVENUE**  
CITY-ST-ZIP **MIAMI BEACH, FL 33139**

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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

**(954) 385-9030**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE