

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 21, 2006 08:00 AM
Secretary of State

DOCUMENT # A96000000859

1. Entity Name
MARJOVEC FIRST FAMILY LIMITED PARTNERSHIP



Principal Place of Business
**1800 LAKE DRIVE
DELRAY BEACH, FL 33444**

Mailing Address
**1800 LAKE DRIVE
DELRAY BEACH, FL 33444**



03162006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0671751

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**SCIARRETTA, STEVEN A ESQ.
2300 GLADES ROAD, SUITE 302E
BOCA RATON, FL 33431**

**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

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

1100000476255
04/06/06-80003-001 500.00

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 #	NAME	STREET ADDRESS	CITY - ST - ZIP
	VECCIA, JOSEPH W JR.	1800 LAKE DRIVE	DELRAY BEACH, FL 33444
DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP
	VECCIA, MARY	1800 LAKE DRIVE	DELRAY BEACH, FL 33444
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

Mary Veccia **Mary Veccia** **3/20/06** **561-330-3236**