

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

**DOCUMENT # A98000001742**

Entity Name  
**LION'S LAIR AT GRASSY KEY, LTD.**



Principal Place of Business  
**1215 EAST HILLSBORO BOULEVARD  
DEERFIELD BEACH, FL 33441**

Mailing Address  
**1215 EAST HILLSBORO BOULEVARD  
DEERFIELD BEACH, FL 33441**

**DO NOT WRITE IN THIS SPACE**



04102006 No Chg-LP CR2E003 (11/05)

4. FEI Number **65-0906491** Applied For  Not Applicable

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

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

**SAUTTER, C. CHRISTIAN ESQ.  
SEILER & SAUTTER, ATTORNEYS AT LAW  
2900 EAST OAKLAND PARK BLVD., #200  
FORT LAUDERDALE, FL**

**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**

*file 4/20/06  
H/NOV*

**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 #	P98000057597
NAME	LION'S LAIR, INC.
STREET ADDRESS	1215 EAST HILLSBORO BOULEVARD
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000531738  
05/06/06-80055-018 500.00

**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:** \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #