2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A99000000743

1. Entity Name
CENTRE COURT ON 53RD, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAR -3 AM 9:18

Principal Place of Business	Mailing Address
~~1343 MAIN STREET, 5TH FLOOR~~	4255 52ND PLACE W.
~~SARASOTA, FL 34336~~	BRADENTON, FL 34210

01272006 Chg-LP CR2E003 (11/05)

2. Principal Place of Business	3. Mailing Address
4255 52nd Place W.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Bradenton FL	City & State
Zip: 34210 Country	Zip Country

4. FEI Number: 65-0917716 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
T. MANNAUSE & COMPANY	Name
4255 52ND PLACE WEST	Street Address (P.O. Box Number is Not Acceptable)
BRADENTON, FL 34210	
	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.

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

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 #	P98000015002	STREET ADDRESS	
NAME	CENTRE COURT ON 53RD, INC.		
STREET ADDRESS	~~1343 MAIN STREET, 5TH FLOOR~~ 4255 52nd Place West	CITY-ST-ZIP	900068095209 03/20/06--01017--005 **508.75
CITY-ST-ZIP	~~SARASOTA, FL 34336~~ Bradenton FL 34210		
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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: ______________________ 2/6/06 9413651511
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #