

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # A99000001282

1. Entity Name
HALE FAMILY 1999 LIMITED PARTNERSHIP



Principal Place of Business
**9250 US ROUTE 1
WABASSO, FL 32970**

Mailing Address
**C/O SUSAN B. HALE
P.O. BOX 700217
WABASSO, FL 32970**

000000404549
02/07/06-80004-009 500.00



01232006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0944141

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HALE, SUSAN
9255 US HWY #1
WABASSO, FL 32970**

**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

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 # **P99000056301**
NAME **M&S HALE, INC.**
STREET ADDRESS **P.O. BOX 700217**
CITY-ST-ZIP **WABASSO, FL 32970**

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IN THIS SPACE**

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:

Susan B. Hale **SUSAN B. HALE** **1-24-06** **772-581-7741**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE