2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006

FILED
Mar 03, 2006 08:00 AM
Secretary of State

DOCUMENT # A99000002209

1. Entity Name

VAUGHN FAMILY LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
100 SOUTH ASHLEY DR., STE 1300 TAMPA FL 33602	67 LADOGA AVENUE TAMPA FL 33606

1st MOORE CR2E003 (10/05)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-7168778 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

KELLY, PETER J ESQ.
100 S. ASHLEY DRIVE, STE. 1300
TAMPA FL 33601

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

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. * After May 1, 2006, fee will be $900. *** Make check payable to Florida Department of State.**

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 #		STREET ADDRESS	
NAME	VAUGHN, ROBERT E		
STREET ADDRESS	67 LADOGA AVE.	CITY-ST-ZIP	H00000045547 03/15/06-00007-013 500.00
CITY-ST-ZIP	TAMPA FL 33606		
DOCUMENT #		STREET ADDRESS	
NAME	VAUGHN, FRANCES C		
STREET ADDRESS	67 LODOGA AVE.	CITY-ST-ZIP	
CITY-ST-ZIP	TAMPA FL 33606		
DOCUMENT #		STREET ADDRESS	
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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

Frances C. Vaughn

SIGNATURE: Frances C. Vaughn 3/4/06 813-259-1107