

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 24, 2006 08:00 AM
Secretary of State

DOCUMENT # A06799
1. Entry Name
ANASTASIA ASSOCIATES, LTD.



Principal Place of Business
516 LAKEVIEW ROAD, UNIT 8
CLEARWATER, FL 33756

Mailing Address
516 LAKEVIEW ROAD, UNIT 8
CLEARWATER, FL 33756



01172006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1844551

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FLYNN, THOMAS F
516 LAKEVIEW ROAD
UNIT 8
CLEARWATER, FL 33756

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 # **L03000016977**
NAME **DUNES, LLC**
STREET ADDRESS **516 LAKEVIEW ROAD, UNIT 8**
CITY-ST-ZIP **CLEARWATER, FL 33756**

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

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000444868
03/07/06-80016-024 508.75

DO NOT WRITE
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:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

As Vice-President of
LLC General Partner

02/15/2006 727-449-1182

Date

Daytime Phone #

STAPLE CHECK HERE