

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # A00000000084

1. Entity Name
H. MATHIAS, LTD.



Principal Place of Business
**3916 HUNTERS ISLE DRIVE
ORLANDO, FL 32837**

Mailing Address
**3916 HUNTERS ISLE DRIVE
ORLANDO, FL 32837**



01042006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3616972

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**MATHIAS, HELEN
3916 HUNTERS ISLE DRIVE
ORLANDO, FL 32837**

**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 # **P00000003141**
NAME **H. MATHIAS, INC.**
STREET ADDRESS **3916 HUNTERS ISLE DRIVE**
CITY-ST-ZIP **ORLANDO, FL 32837**

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**000000393423
01/25/06-800020-009 500.00**

**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

HELEN MATHIAS

Date

Daytime Phone #

1-16-06 407 857-5690

STAPLE CHECK HERE