

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**May-01, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A00000000286</b> 1. Entity Name <b>VARNADOE LIMITED PARTNERSHIP</b>					
Principal Place of Business <b>303 LAKE HOLLINGSWORTH DRIVE          LAKE LAND, FL 33801</b>			Mailing Address <b>303 LAKE HOLLINGSWORTH DRIVE          LAKE LAND, FL 33801</b>		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		04202006    Chg-LP    CR2E003 (11/05)	
Zip		Country		4. FEI Number <b>59-3706152</b>	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required			
6. Name and Address of Current Registered Agent <b>VARNADOE, GLEN R          303 LAKE HOLLINGSWORTH DRIVE          LAKE LAND, FL 33801</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		
<b>FILE NOW!!! FEE IS \$500.00</b> <b>After May 1, 2006, Fee will be \$900.00</b>					
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP			STREET ADDRESS CITY - ST - ZIP		
<b>VARNADOE, GLEN R          303 LAKE HOLLINGSWORTH DRIVE          LAKE LAND, FL 33801</b>			<b>U00000554072          05/15/06-80075-011 500.00</b>		
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					
<b>SIGNATURE:</b> <b>4/25/2006</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>					
<b>GLEN R. VARNADOE, G.P.</b>					

STAPLE CHECK HERE