
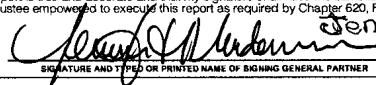


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 MAR 17 AM 10:46

DOCUMENT # A00000000439			
1. Entity Name I & H FAMILY PARTNERSHIP, LTD.			
Principal Place of Business 600 SAND LAKE COURT MOUNT DORA, FL 32757		Mailing Address 600 SAND LAKE COURT MOUNT DORA, FL 32757	
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 59-3630332		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
HART, DONALD E 600 SAND LAKE COURT MOUNT DORA, FL 32757		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 \$500.00			
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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	EDWINS, LYNN - H TRUSTEE	CITY- ST- ZIP	
CITY- ST- ZIP	7385 S.W. 122ND STREET PINECREST, FL 33156		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	REECE, KANDY H TRUSTEE	CITY- ST- ZIP	
CITY- ST- ZIP	2772 EDGEWATER DRIVE NICEVILLE, FL 32578		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	HENDERSON, JENNIFER H TRUSTEE	CITY- ST- ZIP	
CITY- ST- ZIP	7755 LAKE OLA DRIVE MOUNT DORA, FL 32757		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	HART, JONATHAN A TRUSTEE	CITY- ST- ZIP	
CITY- ST- ZIP	75 TANQUERAY SHARPSBURG, GA 30277		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS		CITY- ST- ZIP	
CITY- ST- ZIP			
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS		CITY- ST- ZIP	
CITY- ST- ZIP			
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: 		Date: 3/14/06 Daytime Phone #: 352-735-4860	

STAPLE CHECK HERE