

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

**FILED**  
**May 04, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # A00000000446

1. Entity Name  
FORTUNE STREET PARTNERS, LTD.



Principal Place of Business  
111 WEST FORTUNE STREET  
TAMPA, FL 33602

Mailing Address  
111 WEST FORTUNE STREET  
TAMPA, FL 33602



04282006 No Chg-LP

CR2E003 (11/05)

4. FEI Number  
59-3612636

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

CALLEN, DAVID H  
111 WEST FORTUNE STREET  
TAMPA, FL 33602

**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 # P00000024930  
NAME FORTUNE STREET HOTEL, INC.  
STREET ADDRESS 8870 N. HIMES AVE, #242  
CITY - ST - ZIP TAMPA, FL 33614

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STREET ADDRESS  
CITY - ST - ZIP

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000000563744  
05/20/06-80024-018 500.00

**DO NOT WRITE  
IN THIS SPACE**

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

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Andre P. Callen

Date

5/1/06

Daytime Phone #

(813) 229-6686