


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006

FILED
Jul 19, 2006 08:00 AM
Secretary of State

DOCUMENT # A00000000612 1. Entity Name HUNTER FAMILY LIMITED PARTNERSHIP NO. 2					
Principal Place of Business 1512 S.W. 5TH AVENUE OCALA, FL 34474			Mailing Address 1512 S.W. 5TH AVENUE OCALA, FL 34474		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-3642289	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent HUNTER, J MARSHALL 1512 S.W. 5TH AVENUE OCALA, FL 34474			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.			In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>			DATE _____		
FILE NOW!!! FEE IS \$500.00 Due by September 6, 2006					
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	CITY - ST - ZIP	
HUNTER, ELLIS B TRUSTEE	1512 S.W. 5TH AVENUE		000000571185 07/19/06-80005-006 509.75		
HUNTER, GLADYS M TRUSTEE	1512 S.W. 5TH AVENUE				
JAMES MARSHALL HUNTER	1512 S.W. 5TH AVENUE				
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: <i>J. Marshall Hunter</i>		
SIGNATURE: _____ <small>SIGNATURE OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			Date: <i>7/10/06</i>		

STAPLE CHECK HERE