## 2006 LIMITED PARTNERSHIP ANNUAL REPORT

## FILED Due By May 1, 2006 Apr 17, 2006 08:00 AN Secretary of State DOCUMENT # A00000001108 EMPIRE FLORIDA PROPERTIES, LTD. Principal Place of Business Mailing Address 18856 S.E. RED APPLE LANE 18856 S.E. RED APPLE LANE JUPITER, FL 33458 JUPITER, FL 33458 02052006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1024097 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CFRA, LLC DO NOT WRITE CORPORATE CENTER THREE AT INT'L PLAZA 4221 W. BOY SCOUT BLVD, 10TH FLOOR IN THIS SPACE TAMPA, FL 33607-5736 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 II applicable. FILE NOWIII 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 # P00000066923 EMPIRE FLORIDA MANAGEMENT, INC. NAME STREET ADDRESS 18856 S.E. RED APPLE LANE CITY-ST-ZIP JUPITER, FL 33458 000000514666 04/29/06-80181-012 500**.00** DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

ed with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information is 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 legute this spoot as required by Chapter 620, Florida Statutes I hereby certify that the information supplied indicated on this report is true and accurate or the receiver or trustee

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT #

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER