

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

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

DOCUMENT # A0000001819 1. Entity Name GR ASSOCIATES LIMITED PARTNERSHIP	
---	---

Principal Place of Business 1350 E NEWPORT CENTER DP SUITE 206 DEERFIELD BEACH, FL 33442	Mailing Address 1350 E NEWPORT CENTER DR SUITE 206 DEERFIELD BEACH, FL 33442
---	---



04212006 No Chg-LP CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-1062128	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

KAY, JAMES R ESQ  
% KAY LAW OFFICES  
700 VILLAGE SQUARE CROSSING., STE 102B  
PALM BEACH GARDENS, FL 33410

**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 \_\_\_\_\_ 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	
DOCUMENT #	P00000110840
NAME	GR INVESTMENTS INC
STREET ADDRESS	1350 E NEWPORT CENTER DR SUITE 206
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000557444  
05/17/06-80050-011 508.75

**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: Linda G. Kassof DATE: 04/27/2006 DAYTIME PHONE #: (954) 428-4585  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING GENERAL PARTNER