

# **2006 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A01000000059

**FILED**  
**Apr 27, 2006**  
**Secretary of State**

**Entity Name:** DAVIS ASSOCIATES AND PARTNERS, LTD. LLLP

**Current Principal Place of Business:**

C/O FELICE S. DAVIS  
NINE ISLAND AVENUE, UNITE 615  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

C/O FELICE S. DAVIS  
NINE ISLAND AVENUE, UNITE 615  
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number:** 65-1068651

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVENUE, SUITE 125  
CORAL GABLES, FL 33146 US

**Name and Address of New Registered Agent:**

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.

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

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: DAVIS, FELICE S

Address: NINE ISLAND AVENUE, UNIT 615

City-St-Zip: MIAMI BEACH, FL 33139

**ADDRESS CHANGES ONLY:**

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: FELICE DAVIS

GP

04/27/2006

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date