## 2006 LIMISED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

STAPLE CHECK HERE

SIGNATURE:

FILED
Apr. 20, 2006 08:00 AN
Secretary of State

DOCUMENT #A0100000592  1. Entity Name FAIR PIE ENTERPRISES, LTD.			Secretary of State
Principal Place of Business Mailing Address 11201 KNIGHTS GRIFIN ROAD 11201 KNIGHTS GRIFIN ROAD THONOTOSASSA, FL 33592 THONOTOSASSA, FL 33592			
DO NOT WRITE IN THIS SPACE			01162006 No Chg-LP
			59-3718165 Not Applicable  5. Certificate of Status Desired \$8.75 Additional
6. Name and Address of Current Registered Agent			Fee Required
SLATTON, LOIS M 11201 KNIGHTS GRIFIN ROAD THONOTOSASSA, FL 33592			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 p inted name of registered agent and little 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 #	P01000043583 SLATS INC.		
STREET ADDRESS	11201 KNIGHTS GRIFIN ROAD		
CITY ST-ZIP	THONOTOSASSA, FL 33592		000000521526 05/02/06-80138-017 508.75
DOCUMENT #  NAME STREET ADDRESS CITY > ZIP			05/02/06-80138-017 508.75
DOCUMENT#			
NAME			
STREET ADDRESS			DO NOT WRITE
CITY ST ZIP			IN THIS SPACE
DOCUMENT # NAME			IN THIS SPACE
STREET ADDRESS			
CHY ST ZIP			
DOCUMENT#			
name Street address			
CHY ST ZIP			
DOCUMENT#		_	
NAME			
STREET ADDRESS CITY ST ZIP			
14. Usereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes Liturbay 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			