

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

**FILED**  
**Mar 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A01000000693**

1. Entity Name  
**THE FRICKE FAMILY LIMITED PARTNERSHIP**



Principal Place of Business  
**253 BAREFOOT BEACH BOULEVARD, PH-01  
BONITA SPRINGS, FL 34134**

Mailing Address  
**2301 BYRD STREET  
RALEIGH, NC 27608**



03162006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-6365524</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

**BUCKEL, ROBERT M ESQ.  
5801 PELICAN BAY BOULEVARD, SUITE 300  
NAPLES, FL 34108**

**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 printed name of registered agent and title if applicable

DATE \_\_\_\_\_

**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 #	
NAME	<b>FRICKE, RICHARD J</b>
STREET ADDRESS	<b>27 GOVERNOR STREET</b>
CITY-ST-ZIP	<b>RIDGEFIELD, CT 06877</b>

DOCUMENT #	
NAME	<b>FRICKE, DAVID R</b>
STREET ADDRESS	<b>2301 BYRD STREET</b>
CITY-ST-ZIP	<b>RALEIGH, NC 27608</b>

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**UD00000475948**  
**04/05/06-80037-007 500.00**

**DO NOT WRITE  
IN THIS SPACE**

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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

**DAVID R. Fricke, general partner**

**3/17/06**

Date

**919-899-3001**

Daytime Phone #

STAPLE CHECK HERE