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

SIGNATURE:

## Feb 06, 2006 08:00 AM Secretary of State DOCUMENT #A01000000719 SCHWEITZER REALTY GROUP, LTD. Mailing Address Principal Place of Business P.O. BOX 8552 P.O. BOX 8552 CORAL SPRINGS, FL 33075 CORAL SPRINGS, FL 33075 01232006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1107626 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PETER J. SCHWEITZER & ASSOC DO NOT WRITE 4996 W. ATLANTIC BLVD MARGATE, FL 33063 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 lamillar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title it applicable FILE NOW!!! FEE S \$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. GENERAL PARTNER INFORMATION 12. L43720 DOCUMENT ( PETER J. SCHWEITZER & ASSOCIATES, INC. NAME STREET ADDRESS 4996 W. ATLANTIC BLVD CITY - ST - ZIP MARGATE, FL 33063 ODCUMENT # U00000424240 02/18/06-80036-016 500.00 NAME STREET ADDRESS City-S7-ZIP DOCUMENT # HAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS City-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS 14. I hereby certify that the information supplied with this liking 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 account 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.

ED OR PRINTED NAME OF SIGNING GENERAL PARTHER

**FILED**