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

DOCUMENT # A01000001095 1. Entity Name

PALMETTO PARK I, LTD.

Principal Place of Business Mailing Address

120 E. PALMETTO PARK ROAD, #410 120 E. PALMETTO PARK ROAD, #410 BOCA RATON, FL 33432 BOCA RATON, FL 33432

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



## DO NOT WRITE IN THIS SPACE

04212006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 65-1134095

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIMIGRAN, KENNETH H 120 E. PALMETTO PARK ROAD, #410 BOCA RATON, FL 33432

## 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, Vived or printed name of registered agent and littles 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 #	P01000078575		
NAME	WC PALMETTO PARK INC		
STREET ADDRESS	120 E. PALMETTO PARK ROAD, #410		
CITY-ST-ZIP	BOCA RATON, FL 33432	፤ የሲውሲያስትም ማካለት ተ	
DOCUMENT #		U00000553781 05/15/06-80067-003 500.00	
NAME		U3/15/U6-8UU51-UU3 5UU.UU	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #			
NAME			
STREET ADDRESS		I DO NOT WRITE	

STREET ADDRESS CITY-ST-ZIP

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

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

IN THIS SPACE