2006 LIMITED PARTNERSHIP ANNUAL REPORT

SIGNATURE:

STORATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTY

FILED Due By May 1, 2006 May 06, 2006 08:00 AM Secretary of State **DOCUMENT # A01000001168** 1. Entity Name MAGICK HAPPENS, LTD. Principal Place of Business Mailing Address 825 WATER OAK ROAD **825 WATER OAK ROAD** BUNNELL, FL 32110 BUNNELL, FL 32110 CR2E003 (11/05) 01312006 No Cha-LP DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For **NOT APPLICABLE** Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CLARK, RONALD E ESQ. DO NOT WRITE **501 ST JOHNS AVE** PALATKA, FL 32177 IN THIS SPACE 3. The above named entity submits this externent 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 trie if applicable U000000541641 05/10/06-80066-004-**500.00** 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. GENERAL PARTNER INFORMATION 12. DOCUMENT # NAME WALL, SONDRAID STREET ADDRESS 825 WATER OAK ROAD CITY-SI-DP BUNNELL, FL 32110 DOCUMENT # NAME STREET ADDRESS GITY-57-77P DOCUMEN! # NAME DO NOT WRITE STREET ADDRESS CATY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS City-St-7P STAPL DOCUMENT # NAME STREET ADDRESS CITY-ST-ZP 14. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statuses. I turther 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 cath, 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