2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

1

SIGNATURE

FILED Feb 06, 2006 08:00 AM Secretary of State

1/30/06 407-831-6633

	1. Entity Name	MENT #A01000001357 PARTNERS, LTD		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Secretary of State	
- 	999 DOUGLA	ncipal Place of Business 9 DOUGLAS AVENUE 99 DOUGLAS AVENUE 20 1MONTE SPRINGS, FL 32714 Mailing Address 999 DOUGLAS AVENUE 3320 ALTMONTE SPRINGS, FL		LAS AVENUE E SPRINGS, FL 32714 HIS SPACE		01182006 No Chg-LP	
	DO NOT WRITE IN TH						
	W & P SERVICES, INC. 1936 LEE ROAD, SUITE 101 WINTER PARK, FL 32789		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DO NOT WRITE IN THIS SPACE			
	8. The above named entity submits this statement for the purpose of changing its retite obligations of registered agent. SIGNATURE Signature, upped or printed name of registered agent and the N applicable. FILE NOWIII FEE IS \$500.00			egiste	red office or register	red agent, or both, in the State of Florida. I am familiar with, and accept	
STAPLE CHECK HERE	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. OCCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / HAME STREET ADDRESS CITY-ST-ZIP	GENERAL PARTNER INFO P01000035177 KPK HOLDINGS, INC. 999 DOUGLAS AVENUE STE. 332D ALTMONTE SPRINGS, FL 32714	RMATION			U00000422645 02/17/06-80025-017 500.00	
	DOCUMENT # MAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS				DO NOT WRITE IN THIS SPACE		
	STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP						
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP 14. 1 heroby	certify that the information supplied with this t	iling does not qualify h	ar the	exemptions contain	ed in Chapter 119, Florida Statutes. I further certify that the information	
	or the re	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 eath; that I am a General Partner of the limited partnership or the receiver or trustee approvered to execute this report as required by Chapter 620, Florida Statutes.					