2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DO NOT WRITE IN THIS SPACE

DOCUMENT # A01000001582

1. Entity Name
PERRINE RANCH LTD.



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

Principal Place of Business

Malling Address

9020 RANCHO DEL RIO DRIVE, SUITE 125 NEW PORT RICHEY, FL 34655 9020 RANCHO DEL RIO DRIVE, SUITE 125 NEW PORT RICHEY, FL 34655



01252006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 65-1159296 Applied For Not Applicable

5. Certificate of Status Desked

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEEB, ALEX 9020 RANCHO DEL RIO DRIVE, SUITE 125 NEW PORT RICHEY, FL 34655

DO NOT WRITE IN THIS SPACE

NEW PORT RICHEY, FL 34655		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 Fiorida. I am familiar with, and accept the obligations of registered agent. UDCDOD4 75718 SIGNATURE Signature, typed or pithled name of registered agent and title if epithosobia.		
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 #	K47763	
NAME	TRI COUNTY DEVELOPMENT, INC.	
STREET ADDRESS CITY-ST-ZIP	9020 RANCHO DEL RIO DRIVE, SUITE 125 NEW PORT RICHEY, FL 34655	
	NEW PORT RICHET, FL 34000	
DOCUMENT#		
NAME STREET ADDRESS		
City-St-ZiP		
DOCUMENT#		
NAME		
STREET ADDRESS		DO NOT WRITE
CITY-ST-ZIP		001101111111
DOCUMENT #		IN THIS SPACE
NAME		
STREET ADDRESS		
CITY-\$1-2)P		
DOCUMENT #		
NAME	1	
STREET ADDRESS		
CITY-ST-ZIP		
DOCUMENT #		

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 gath; 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.

The Comment of the limited partnership 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: Ex

STAPLE CHECK HERE

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

727 376-6831