

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT #A01000001649

1. Entity Name
M & I COWAN STABLES, LLLP



Principal Place of Business
**3725 SOUTH OCEAN DRIVE, SUITE 718
HOLLYWOOD, FL 33019**

Mailing Address
**3725 SOUTH OCEAN DRIVE, SUITE 718
HOLLYWOOD, FL 33019**

FILED

06 MAY -1 PM 1:48

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**



01242006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
01-0566691

Applied For
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SHORE, H. ALLAN ROCHELLE F. MORSE
ONE S.E. THIRD AVENUE, 28TH FLOOR
MIAMI, FL 33019 3725 So. Ocean Dr.
HOLLYWOOD FL 33019 #718

**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 *Rochelle F. Morse*
Signature, typed or printed name of registered agent and title if applicable.

3/8/09

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 # **P96000100236**
NAME **M & I COWAN INVESTMENTS, INC.**
STREET ADDRESS **3725 SOUTH OCEAN DRIVE, SUITE 718**
CITY-ST-ZIP **HOLLYWOOD, FL 33019**

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05/15/06--01005--011 **508.75

**DO NOT WRITE
IN THIS SPACE**

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

Date

Daytime Phone #

3/07/06 9544588898

STAPLE CHECK HERE