2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

Due by may 1, 2000					-	** <u>F</u> **)	CEO
DOCUMENT # A0100001690 1. Entity Name DFG OF NAPLES LIMITED PARTNERSHIP					DI -	SECRETAR VISION OF (06 APR 24	TED Y OF STATE CRPORATIONS AM 10: 56
Principal Place of Business 4487 WAYSIDE DRIVE NAPLES, FL 34119 Mailing Address 4487 WAYSIDE DRIVE NAPLES, FL 34119							
2. Principal Place of Business 4473 WAYSTO E SELECT 4473 WAYSTO				J. 16			
Suite, Apt. #, etc. Suite, Apt. #, etc.					04072006	Chg-LP	CR2E003 (11/05)
City & State NAPLES Zip Country City & State NAPLES Zip Country Zip			FL	-	4. FEI Number 01-0589		Applied For Not Applicable
Zip 341	19 Country	Zip		try	5. Certificate of Status		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name			
1	DANIEL F		GERMEN, DANIELE. Street Address (P.O. Box Number is Not Acceptable)				
4487 WAYSIDE DRIVE NAPLES, FL 34119				City NAPLL FL Zip Code 34/19			
				City APP	9/1/2		FL Zip Code 34// 9
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. Lam familiar with, and the obligations of registered agent.							orida. I am familiar with, and accept
SIGNATURE DAVIEL OFFICE Would Signature, typed or printed name of registered agent and title if applicable.							
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 PARTNEF	13.					
NAME STREET ADDRESS	GERNER, DANIEL F 4487 WAYSIDE DRIVE			STREET ADDRESS 4473 WAYSTOF ORIVE CITY-ST-ZIP NAPLES FL 34119			
CITY-ST-ZIP	NAPLES, FL 34119		CITY-	ST-ZIP	PLES	FZ 3	24119
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NAME STREET ADDRESS CITY-ST-ZIP				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: DAVIEL GENER World General Partner 4/5/06 239-596-3837 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Destroy Phone 6							
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytone Phone #							