2006 LIMITED PARTNERSHIP ANNUAL REPORT. Due By May 1, 2006

FILED Feb 09, 2006 08:00 AN Secretary of State

Due By May 1, 2006		
DOCUMENT # A01513 1. Entity Name SUGAR MILL RUINS LIMITED		
Principal Place of Business	Mailing Address	<u> </u>



DO NOT WRITE IN THIS SPACE

1050 OLD MISSION ROAD

NEW SMYRNA BEACH, FL 32168

01242006 No Chg-LP C

CR2E003 (11/05)

4. FEI Number 59-1174226

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

1050 OLD MISSION ROAD

STAPLE CHECK HERE

NEW SMYRNA BEACH, FL 32168

	BART F MISSION ROAD RNA BEACH, FL 32168	DO NOT WRITE IN THIS SPACE	
	named entity submits this statement for the purpose of changing its reaches of changing its received agent.	egistered office or régistered agent, or both, in the State of Florida. I am familiar with, and accépt	
SIGNATURE .	Signature, apped or printed name of registered agent and title if applicable	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 / NAME STREET ADDRESS CITY-ST-ZIP	BEEDLE, RITA M 1050 OLD MISSION RD. NEW SMYRNA BEACH, FL	U00000425516 02/20/06-80002-001 508.75	
DOCUMENT # NAME STREET ADDRESS CITY ST-ZIP			
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE	
DOCUMENT # NAME STREET ADDRESS GITY-ST-ZIP		IN THIS SPACE	
DOCUMENT / NAME CIREET ADDRESS CITY-ST-ZIP			
OOCUMENT * NAME STREET ADDRESS			

14. I hereby certify that the information supplied with this filling 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 OF PRINTED NAME OF SIGNING GENERAL PARTNER

2/1/06 386-427-20