


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 06 MAY -1 AM 9:41

DOCUMENT # A02000000169

1. Entity Name
 ECH ENTERPRISES, LTD.



Principal Place of Business
 3890 TURTLE CREEK DRIVE, SUITE B
 PORT ORANGE, FL 32127

Mailing Address
 3890 TURTLE CREEK DRIVE, SUITE B
 PORT ORANGE, FL 32127



04202006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 68-0487589

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FRIEBIS, DANIEL S
 3890 TURTLE CREEK DRIVE, SUITE B
 PORT ORANGE, FL 32127

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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 _____ DATE _____
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 PARTNER INFORMATION

DOCUMENT #	L02000002886
NAME	MANAGEMENT ADVISORS, L.L.C.
STREET ADDRESS	3890 TURTLE CREEK DRIVE, SUITE B
CITY - ST - ZIP	PORT ORANGE, FL 32127
DOCUMENT #	
NAME	
STREET ADDRESS	
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STAPLE CHECK HERE

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: *Daniel Friebis* DANIEL FRIEBIS /GP 4/29/06 386-788-6057
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #