2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Apr 06, 2006 08:00 AM Secretary of State

Due By May 1, 2006				Secretary of State	
1. Entity Nam	MENT # A02000 TEIN FAMILY LIMITED	000734 PARTNERSHIP 2002,		Secretary of St	late
	ie of Business I BLVD., SUITE C FL 34242	Mailing Address 5111 OCEAN BLVD., SUITE C SARASOTA, FL 34242		s success success from which were recorded to the control of the c	((#1211 1 1 12 1 1
E		TE IN THIS SPA	CE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Applied For Not Applicable
6. Name and Address of Current Registered Agent CHAPNICK, BRUCE P ESQ. C/O ICARD, MERRILL, ET AL 2033 MAIN STREET, SUITE 600 SARASOTA, FL 34237				DO NOT WRITE IN THIS SPACE	
8. The above named entity submits this statement for the purpose of changing its registered office or the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. FILE NOWILL FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00			red office or register	registered agent, or both, in the State of Florida. I am familiar with, and accept DATE [U00000435110] [U4/20/06-80071-907 500.00	
				TERED AND ACTIVE WITH THIS OFFICE. It must be filed to change a general partner.	
DOCUMENT # NAME STRIET ADDRESS CITY-ST-ZIP COCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # DOCUMENT # DOCUMENT # DOCUMENT #	SILVERSTEIN, BARRY 5111 OCEAN BLVD., SUIT SARASOTA, FL 34242	RTNER INFORMATION E.C		DO NOT WRITE IN THIS SPACE	
NAME STREET ADDRESS					

14. I hereby certify that the information supplied willt 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 eath; 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: