## 2006 LIMITED PARTNERSHIP ANNUAL REPORT

## Due By May 1, 2006 DOCUMENT # A02000001043



**FILED** May 01, 2006 08:00 AM Secretary of State

Principal Place of Business

430 NE 1ST AVE., SUITE D HIGH SPRINGS, FL 32643 Mailing Address

430 NE 1ST AVE., SUITE D HIGH SPRINGS, FL 32643



DO NOT WRITE IN THIS SPACE

04272006 No Chg-LP

CR2E003 (11/05)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

5. Name and Address of Current Registered Agent

1. Entity Name MARK AND TIM PALETTI LIMITED PARTNERSHIP

PALETTI, TIMOTHY M 430 NE 1ST AVE., SUITE D HIGH SPRINGS, FL 32843

## DO NOT WRITE IN THIS SPACE

å.	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.		
	the obligations of registered agent.	•	•

Signature, typed or printed name of registered agent and site if applicable.

DATE

FILE NOW!! FEE IS \$500,00 After May 1, 2008, 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.

GENERAL PARTNER INFORMATION 12. DOCUMENT # PALETTI, TIMOTHY M STREET ADDRESS 430 NE 1ST AVE., SUITE D CITY-ST-ZIP HIGH SPRINGS, FL 32643 DOCUMENT # STREET ADDRESS CXTY-ST-ZIP SOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT A NAME STREET ADDRESS

000000554835 05/16/06-80004-025 500.00

## DO NOT WRITE IN THIS SPACE

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 path; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 820, Florida Statutes

SIGNATURE:

CITY-ST ZIP

2000

Timothy W. Paletti SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING GENERAL PARTNE