2006 LIMITED PARTNERSHIP ANNUAL REPORT

FILED Apr 17, 2006 08:00 AN Secretary of State

د ٠	Due by may 1, 2006	
DOCUMENT	#A0200001076	.9

1. Entity Name

C. ELTON CREWS FAMILY LIMITED PARTNERSHIP, LLLP



Principal Place of Business

Mailing Address

300 E. CORNELL STREET AVON PARK, FL 33825

P.O. BOX 1669

AVON PARK, FL 33826



DO NOT WRITE IN THIS SPACE

04112006 No Chg-LP CR2E003 (11/05)

4. FEI Number Applied For 51-0420404 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

CREWS, ROBERT C. II 300 E. CORNELL STREET AVON PARK, FL 33825		DO NOT WRITE IN THIS SPACE	
	lons of registered agent.	egistered office or registered agent, or both, in the State of Florida. I am familiar with, and accept	
	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.	DATE	
		FITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. e form; an amendment must be filed to change a general partner.	
DOCUMENT # NAME STREET ADDRESS CITY-ST-JIP DOCUMENT #	GENERAL PARTNER INFORMATION CREWS, C. ELTON 300 E. CORNELL STREET AVON PARK, FL 33825	U00000515495 04/29/06-80208-020 500.00	
NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS	-	DO NOT WRITE	
CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE	
DOCUMENT # NAME SIREET ADDRESS CITY-ST-ZIP			
DOCUMENT # 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 eport as required by Chapter 620, Florida Statutes

SIGNATURE:

STAPLE CHECK HERE