


058

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

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

DOCUMENT # A02000001513 1. Entity Name BAINBRIDGE FAIRVIEW, LTD	
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Principal Place of Business 12791 WEST FOREST HILL BLVD STE. 5B WELLINGTON, FL 33414	Mailing Address 12791 WEST FOREST HILL BLVD STE. 5B WELLINGTON, FL 33414
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DO NOT WRITE IN THIS SPACE



03202006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 11-3663445	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**BAINBRIDGE FAIRVIEW, INC.
12791 WEST FOREST HILL BLVD STE. 5B
WELLINGTON, FL 33414**

DO NOT WRITE IN THIS SPACE

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 #	P02000122298
NAME	BAINBRIDGE FAIRVIEW INC
STREET ADDRESS	12791 WEST FOREST HILL BLVD STE. 5B
CITY-ST-ZIP	WELLINGTON, FL 33414
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05/15/06-80082-001 508.75

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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 820, Florida Statutes

SIGNATURE:  **Thomas J. Keady** 4/20/06 561-333-3669
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE