

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Jan 11, 2006 08:00 AM
Secretary of State

DOCUMENT # A02000001657	
1. Entity Name FRESH ENTERPRISES, LLLP	
	

Principal Place of Business 7409 FLEMING ISLAND DRIVE GREEN COVE SPRINGS, FL 32043	Mailing Address 7409 FLEMING ISLAND DRIVE GREEN COVE SPRINGS, FL 32043
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DO NOT WRITE IN THIS SPACE

01062006 No Chg-LP CR2E003 (11/05)

4. FEI Number 03-0497291	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WATSON, TODD ESQ 7785 BAYMEADOWS WAY, SUITE 107 JACKSONVILLE, FL 32256
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**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 <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE <small>Date</small>
FILE NOW!! FEE IS \$500.00 After May 1, 2006, Fee will be \$300.00	

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners **MAY NOT** be charged on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION	
DOCUMENT #	
NAME	FRESH, FRANCES M
STREET ADDRESS	7409 FLEMING ISLAND DRIVE
CITY-ST-ZIP	GREEN COVE SPRINGS, FL 32043
DOCUMENT #	
NAME	FRESH, ELINORE L
STREET ADDRESS	7409 FLEMING ISLAND DRIVE
CITY-ST-ZIP	GREEN COVE SPRINGS, FL 32043
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	

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01/12/06-80012-024 500.00

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IN THIS SPACE**

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: Elvone L Fresh ELINORE L. FRESH

1/6/06 904-233-0669

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER