2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Feb 17, 2006 08:00 AM Secretary of State

Due By May 1, 2006			Secretary of State	
DOCU! 1. Entity Name SARAHO			Secretary of State	
Principal Place 2032 HILLVII SARASOTA, F	EW STREET 2032 HILLVIEW STREET		A KRINKAN ABIR BANDI BANDI BANG BANG BANG BANG BANG BANG NATUR NATUR NATUR NATUR NATUR NATUR NATUR NATUR NATUR	
_		02132006 No Chg-LP CR2E003 (11/05)		
D	O NOT WRITE IN THIS SI	PACE	4. FEI Number Applied For 54-2089691 Not Applicable	
			5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current Registered Agent			
	CHT, WILLIAM G		DO NOT WRITE	
200 SOUTH ORANGE AVENUE SARASOTA, FL 34236			IN THIS SPACE	
	tions of registered agent.	gistered office or register	red agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATORE	Signature, typed or printed name of registered agent and lifts If applicable.		CATE	
	FILE NOWN: FEE IS \$500.00 After May 1, 2006, Fee will be \$900.			
{	A GENERAL PARTNER THAT IS A BUSINESS ENT NOTE: General Partners MAY NOT be changed on the	'ITY MUST BE REGIS' a form; an amendmer	TERED AND ACTIVE WITH THIS OFFICE. It must be filed to change a general partner.	
12.	GENERAL PARTNER INFORMATION			
DOCUMENT I NAME STREET ADDRESS CITY-ST-ZIP	BALLIETT, JOHN W 2032 HILLVIEW STREET SARASOTA, FL 34239		U00000437696 02/28/06-80056- 0 09 5 08.7 5	
DOCUMENT # NAME STREET ADDRESS CITY ST-ZIP				
DOCUMENT # NAME STREET ADDRESS CITY-ST- OF			DO NOT WRITE	
DOCUMENT #		1	IN THIS SPACE	
STREET ADDRESS				
DOCUMENT #		-		
NAME SIREELADORESS		1		
CITY-ST-ZIP		1		
DOCUMENT # NAME				
STREET ADDRESS CITY-ST-ZU				
14. I hereby indicated or the rec	certify that the information supplied with this filing does not qualify for on this report is true and accurate and that my signature shall have it belief or trustee empowered to execute this report as required by Cha	the exemptions contains ne same legal effect as if r pter 620, Florida Statutes	nd in Chapter 119, Florida Statutes, I further certify that the information nade under oath; that I am a General Partner of the limited partnership	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

SIGNATURE: