

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

06 MAY -1 AM 8:41

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**



04032006 Chg-LP CR2E003 (11/05)

DOCUMENT # A03000000826		
1. Entity Name THE BRAY-HARTMAN LLLP		

Principal Place of Business C/O GUTTENMACHER & BOHATCH, PA 2600 DOUGLAS RD., PH-8 CORAL GABLES, FL 33134	Mailing Address C/O GUTTENMACHER & BOHATCH, PA 2600 DOUGLAS RD., PH-8 CORAL GABLES, FL 33134
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2. Principal Place of Business <i>Guttenmacher, Bohatch PA</i>		3. Mailing Address <i>Guttenmacher, Bohatch PA</i>	
Suite, Apt. #, etc. <i>7301 SW 57th Ave #560</i>		Suite, Apt. #, etc. <i>7301 SW 57th Ave #560</i>	
City & State <i>South Miami, FL</i>		City & State <i>South Miami, FL</i>	
Zip <i>33143-5311</i>	Country <i>USA</i>	Zip <i>33143-5311</i>	Country <i>USA</i>

4. FEI Number 14-1884747	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent BOHATCH, JOHN S ESQ 2600 DOUGLAS RD., PH-8 CORAL GABLES, FL 33134		7. Name and Address of New Registered Agent Name <i>Bohatch, John S., Esq.</i> Street Address (P.O. Box Number is Not Acceptable) <i>7301 SW 57th Ave #560</i> City <i>South Miami</i> FL Zip Code <i>33143-5311</i>	
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	
	BRAY, DAVID EDWARD		<i>7301 SW 57th Ave #560</i>
STREET ADDRESS	2600 DOUGLAS RD., PH-8	CITY-ST-ZIP	<i>South Miami, FL 33143-5311</i>
CITY-ST-ZIP	CORAL GABLES, FL 33134		
DOCUMENT #	NAME	STREET ADDRESS	
	HARTMAN, DAVID NEAL		<i>7301 SW 57th Ave #560</i>
STREET ADDRESS	2600 DOUGLAS RD., PH-8	CITY-ST-ZIP	<i>South Miami, FL 33143-5311</i>
CITY-ST-ZIP	CORAL GABLES, FL 33134		
DOCUMENT #	NAME	STREET ADDRESS	
			800075020348
STREET ADDRESS		CITY-ST-ZIP	05/22/06--01025--004 **500.00
CITY-ST-ZIP			
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP			
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS		CITY-ST-ZIP	
CITY-ST-ZIP			

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 *David E. Bray* X *4-30-06* X *296-3038*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE