

2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A03000000828

FILED
Jan 18, 2006
Secretary of State

Entity Name: WESTON PAVILION PARTNERS, LLLP

Current Principal Place of Business:

2229 NORTH COMMERCE PARKWAY, SUITE 100
C/O WESTON OUTPATIENT SURGICAL CENTER
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

2229 NORTH COMMERCE PARKWAY, SUITE 100
C/O WESTON OUTPATIENT SURGICAL CENTER
WESTON, FL 33326

New Mailing Address:

FEI Number: 20-0027042 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DAVID J. POWERS, P.A.
7777 GLADES ROAD, SUITE 300
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

GENERAL PARTNER INFORMATION:

Document #: L03000027502
Name: PAVILION GENERAL PARTNER, LLC.
Address: 2229 NORTH COMMERCE PARKWAY, SUITE 100
City-St-Zip: WESTON, FL 33326

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: RICHARD FAMIGLIETTI

Electronic Signature of Signing General Partner

01/18/2006

Date