## FILED May 02, 2006 08:00 AM Secretary of State

## 2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

	Due by may 1, 2000	Secretary of State	
DOCU t. Entity Nar GCVF,LL			
Principal Plac	ce of Business Mailing Address		
345 CHANCI	ERY 791 WYE ROAD	-	}
NAPLES, FL		,	}
{			
{			
] _			56-2378912 Noi Applicable
{ <b>E</b>	OO NOT WRITE IN THIS SP	ACE	
<b>,</b> –			
{			
}			5. Certificate of Status Desired \$8.75 Additional
}		<del></del>	Fee Required
<b></b>	6. Name and Address of Current Registered Agent		
		. {	
MEYERSON, ROBERT F		<b>,</b>	DO NOT WRITE
345 CHANCERY		1	
NAPLES,	FL 34110	}	IN THIS SPACE
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1		}	
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 Signature, typed or printed name of registered agent and title if applicable.			
Signature, typed or printed name of registrate agent arm title if approache.			
FILE NOW!!! FEE !3 \$500.00 After May 1, 2006, Fee will be \$800.00			
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.			
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12.	GENERAL PARTNER INFORMATION		
DOCUMENT #	<u> </u>		
NAME	MEYERSON, ROBERT F		
STREET ADDRESS	345 CHANCERY		•
CKY-ST-ZIP	NAPLES, FL 34110		<u> </u>
DOCUMENT #			05/18/06-80001-024 508.75
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14. Thereby 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 that my supplier shall have the same level effect as it made under cath, that I am a Capacial Barbary of the limited partnership.			
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 truetee empowered to execute this report as required by Chapter 620, Florida Statutes.			