


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # A03000001127 1. Entity Name AMERA 99, LTD.	
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Principal Place of Business 2900 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065	Mailing Address 2900 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065
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02242006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-0174231	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent AMERA PROPERTIES, INC. 2900 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office of, 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	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	624912 AMERA PROPERTIES, INC. 2900 UNIVERSITY DRIVE CORAL SPRINGS, FL 33065
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05/06/06-80090-009 508.75

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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:  **Amara Properties, Inc.**
 George Rahael, President 4/15/06 954-753-9500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #