

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

500

DOCUMENT # A03000001164

1. Entity Name
BETTY JEAN JOHNS LIMITED LIABILITY LIMITED
PARTNERSHIP, LLP



Principal Place of Business
404 IRIS STREET
CELEBRATION, FL 34747

Mailing Address
404 IRIS STREET
CELEBRATION, FL 34747

FILED
06 MAY 15 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04262006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1204166

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SHIRLEY, JONATHAN W
171 CIRCLE DRIVE
MAITLAND, FL 34747

**DO NOT WRITE
IN THIS SPACE**

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 *Jonathan W Shirley* *Jonathan W Shirley* *4/26/06*
Signature, typed or printed name of registered agent and title if applicable. DATE

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
JOHNS FAMILY INVESTMENTS II, LLC
404 IRIS STREET
CELEBRATION, FL 34747

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100075547271
05/31/06--01010--013 **1700.00

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IN THIS SPACE**

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: *Maileyn B. Mahoney, manager* *4/28/06* *407-301-4539*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE