

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # A03000001418

1. Entity Name
HANES VENTURES, LTD.



Principal Place of Business

**C/O FOWLER WHITE BOGGS BANKER P.A.
5811 PELICAN BAY BLVD., STE. 600
NAPLES, FL 34108**

Mailing Address

**C/O FOWLER WHITE BOGGS BANKER P.A.
5811 PELICAN BAY BLVD., STE. 600
NAPLES, FL 34108**



01252006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0269510

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

8. Name and Address of Current Registered Agent

**FOWLER WHITE BOGGS BANKER P.A.
5811 PELICAN BAY BLVD., STE. 600
NAPLES, FL 34108**

**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

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 **HANES, ROLENZO A**
STREET ADDRESS **5811 PELICAN BAY BLVD., STE. 600**
CITY-ST-ZIP **NAPLES, FL 34108**

DOCUMENT #
NAME **HANES, MADELINE W**
STREET ADDRESS **5811 PELICAN BAY BLVD., STE. 600**
CITY-ST-ZIP **NAPLES, FL 34108**

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04/25/06-80034-016 500.00

**DO NOT WRITE
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: *Rolando A Hanes* 2/14/06 *Maddie W. Hanes*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE