## 2006 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A0400000060

FILED Feb 09, 2006 Secretary of State

Entity Name: THE RON AND CINDY OKOLICHANY FAMILY LIMITED PARTNERSHIP

417 NORTHLAKE DRIVE NORTH PALM BEACH, FL 33408  Current Mailing Address:  417 NORTHLAKE DRIVE NORTH PALM BEACH, FL 33408  FEI Number: 90-0128125 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OKOLICHANY, RONALD G 417 NORTHLAKE DRIVE NORTH PALM BEACH, FL 33408 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or I in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent Date	Current Pri	incipal Place of Business:	New Principal Place of Business:
417 NORTHLAKE DRIVE NORTH PALM BEACH, FL 33408  FEI Number: 90-0128125 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OKOLICHANY, RONALD G 417 NORTHLAKE DRIVE NORTH PALM BEACH, FL 33408 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or I in the State of Florida.  SIGNATURE:			
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Name and Address of Current Registered Agent:  OKOLICHANY, RONALD G 417 NORTHLAKE DRIVE NORTH PALM BEACH, FL 33408 US  The above named entity submits this statement for the purpose of changing its registered office or registered agent, or lin the State of Florida.  SIGNATURE:			
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	417 NORTH NORTH PAI The above r	HLAKE DRIVE  LLM BEACH, FL 33408 US  named entity submits this statement for	r the purpose of changing its registered office or registered agent, or both
Electronic Signature of Registered Agent Date	SIGNATUR	E:	
		Electronic Signature of Registere	ed Agent Date
GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:	GENERAL PARTNER INFORMATION:		ADDRESS CHANGES ONLY:
Document #:  Name: OKOLICHANY, RONALD G  Address: 417 NORTHLAKE DRIVE Address: City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip: Document #:	Name: Address: City-St-Zip: Document #:	417 NORTHLAKE DRIVE NORTH PALM BEACH, FL 33408	
Name: OKOLICHANY, CYNTHIA M Address: 417 NORTHLAKE DRIVE Address: City-St-Zip: NORTH PALM BEACH, FL 33408 City-St-Zip:	Address:	417 NORTHLAKE DRIVE	

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: RONALD G OKOLICHANY GP 02/09/2006