

2006 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2006

DOCUMENT # A04000001077

1. Entity Name
THE 2003 ABBEY FLP, LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 APR -7 AM 9:14

Principal Place of Business
2946 GOLDEN EAGLE DRIVE
TALLAHASSEE, FL 31301

Mailing Address
2946 GOLDEN EAGLE DRIVE
TALLAHASSEE, FL 31301

2. Principal Place of Business
2946 Golden Eagle Dr. E.

3. Mailing Address
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03182006 Chg-LP CR2E003 (11/05)

City & State

City & State

TALLAHASSEE, FL

Zip

Country

Zip

Country

32312

U.S.

32312

4. FEI Number
APPLIED FOR

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BREWSTER, JAMES R ATTY.
547 N. MONROE STREET, SUITE 203
TALLAHASSEE, FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

13. ADDRESS CHANGES ONLY

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
ABBEY, ABBAS A
2946 GOLDEN EAGLE DRIVE
TALLAHASSEE, FL 31301

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STREET ADDRESS

CITY - ST - ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4/1/06

850-893-0926
850-627-3600