


**2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006**

DOCUMENT # A04000001324 1. Entity Name ROSE M. EDWARDS FAMILY, LTD.	
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Principal Place of Business 5502 SW SUNSHINE FARMS WAY PALM CITY, FL 34990	Mailing Address 5502 SW SUNSHINE FARMS WAY PALM CITY, FL 34990
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JUL 10 AM 11:04

DO NOT WRITE IN THIS SPACE



07062006 No Chg-LP CR2E003 (11/05)

4. FEI Number 11-3734463	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

LEHEL, LARRY
800 W. CYPRESS CREEK ROAD, STE. 470
FORT LAUDERDALE, FL 33309

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$500.00
Due by September 6, 2006**

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**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
	BRANDT, SANFORD R	5502 SW SUNSHINE FARMS WAY	PALM CITY, FL 34990
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST- ZIP
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**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: Sanford R. Brandt 7/6/06 (772) 288-4368
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #