2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A04000001344

1. Entity Name
SANCTUARY OF CORAL GABLES, LTD.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 APR 28 PM 4:33

Principal Place of Business	Mailing Address
275 HAMPTON LANE KEY BISCAYNE, FL 33149-1223	275 HAMPTON LANE KEY BISCAYNE, FL 33149-1223

04262006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1592050
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WOOD, HARLESTON R
275 HAMPTON LANE
KEY BISCAYNE, FL 33149-1223

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
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 #	P04000112349
NAME	METTA OF CORAL GABLES, INC.
STREET ADDRESS	225 LEUCADENDRA DRIVE
CITY-ST-ZIP	CORAL GABLES, FL 33156
DOCUMENT #	
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CITY-ST-ZIP	

800074079298
05/05/06--01047--003 **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

7094

SIGNATURE: W. Scott Ryan III 4/27/06 305-361-7094
SIGNATURE AND TITLE OF PARTNER OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #