## 2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A04000001714

Entity Name: MANGROVE REALTY LIMITED

FILED Mar 28, 2006 Secretary of State

| Current Principal Place of Business:   | New Principal Place             | of Business:   |  |
|--|---------------------------------|--|--|
| 10621 AIRPORT ROAD<br>SUITE 6  | 3380 WOODS EDGE (<br>#303       | 3380 WOODS EDGE CIRCLE                                     |  |
| NAPLES, FL 34109   | BONITA SPRINGS, FL              | . 34134  |  |
| Current Mailing Address:   | New Mailing Address             | New Mailing Address:                                       |  |
| 10621 AIRPORT ROAD<br>SUITE 6<br>NAPLES, FL 34109                                  | #303                            | 3380 WOODS EDGE CIRCLE<br>#303<br>BONITA SPRINGS, FL 34134 |  |
| FEI Number: 20-4584900 FEI Number Applied For ( )                                  | FEI Number Not Applicable ( )   | Certificate of Status Desired (X)                          |  |
| Name and Address of Current Registered Agent:                                      | Name and Address o              | Name and Address of New Registered Agent:                  |  |
| CRAWLAW, LLC<br>28000 SPANISH WELLS BOULEVARD<br>BONITA SPRINGS, FL 34135 US       |                                 |  |  |
| The above named entity submits this statement for the purpin the State of Florida. | pose of changing its registered | d office or registered agent, or both                      |  |
| SIGNATURE:   |                                 |  |  |
| Electronic Signature of Registered Agent   |                                 | Date   |  |
| GENERAL PARTNER INFORMATION:   | ADDRESS CHANGES ONL             | Y:   |  |
| Document #:  |                                 |  |  |

Name: CRAWFORD, J. S

 Address:
 28000 SPANISH WELLS BOULEVARD
 Address:

 City-St-Zip:
 BONITA SPRINGS, FL 34135
 City-St-Zip:

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: J. S. CRAWFORD GP 03/28/2006