


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

06 MAY -1 AM 8:40

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

DOCUMENT # A04000001730 1. Entity Name MAHAFFEY ASSOCIATES MAGNOLIA VALLEY, LLLP.	
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Principal Place of Business 3700 POMPANO DRIVE SE ST. PETERSBURG, FL 33705 100 - 2nd Ave So #302N St. Petersburg, FL 33701	Mailing Address 3700 POMPANO DRIVE SE ST. PETERSBURG, FL 33705 100 - 2nd Ave So #302N St Petersburg, FL 33701
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04072006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2651677	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MAGNOLIA VALLEY GENERAL PROPERTY, LLC 731 JAMESTOWN DRIVE WINTER PARK, FL 32792

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 #	L04000029268
NAME	MAGNOLIA VALLEY GENERAL PROPERTY, LLC
STREET ADDRESS	731 JAMESTOWN DRIVE
CITY-ST-ZIP	WINTER PARK, FL 32792
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
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CITY-ST-ZIP	

500075021775 05/22/06--01025--015 **500.00 DO NOT WRITE IN THIS SPACE
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STAPLE CHECK HERE

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:  **04-10-06** **407-677-0650**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #
James W. Mahaffey