2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT # A05000000663

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

1. Entity Name KEY LARGO MARINA ACQUISITIONS, LLLP					06 P	IAR 27	AM 9:5	I
Principal Place of Business 321 EAST HILLSBORO BLVD. DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441 DEERFIELD BEACH, FL 33441							¥	8 8550 81188 (1518); F1 1871
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02232006	Chg-LP	CR2E00	03 (11/05)
City & State		City & State		4. FEI Number			Applied For Not Applicable	
Zip	Country	Zìp	Coun	try	5. Certificate of S)PL F	8.75 Additional ee Required
6. Name and Address of Current Registered Agent				Name	7. Name and Address of New Registered Agent			
STOTZER, THEODORE R 321 EAST HILLSBORO BLVD. DEERFIELD BEACH, FL 33441				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 sitle 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 13. ADDRESS CHANGES ONLY								
DOCUMENT #	P05000049899			ET ADDRESS				
NAME STREET ADDRESS	BOCA MARINA ACQUISITIONS GP, INC. 321 EAST HILLSBORO BLVD.		O/B	GT 310				
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441		CITY	-ST-ZIP	•			
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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: Mestlete								
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #								