

# **2006 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000000819

**FILED**  
**Apr 30, 2006**  
**Secretary of State**

**Entity Name:** GRIFFIN POINTE PARTNERS, LLLP

**Current Principal Place of Business:**

8725 N.W. 18TH TERRACE, SUITE 204  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

8725 N.W. 18TH TERRACE, SUITE 204  
MIAMI, FL 33172

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DOUGLAS, PAUL  
8725 N.W. 18TH TERRACE, SUITE 204  
MIAMI, FL 33172 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: L05000040627  
Name: GRIFFIN POINTE GP, LLC  
Address: 8725 N.W. 18TH TERRACE, SUITE 204  
City-St-Zip: MIAMI, FL 33172

**ADDRESS CHANGES ONLY:**

Address:  
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: PAUL DOUGLAS FOR GRIFFIN POINTE GP, LLC

GP

04/30/2006

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date