


**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**


FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

06 MAR -3 AM 10: 04

<b>DOCUMENT # A05000000827</b> 1. Entity Name ILY PARTNERSHIP, LLLP	
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Principal Place of Business 1415 LADUE LANE SARASOTA, FL 34231	Mailing Address 1415 LADUE LANE SARASOTA, FL 34231
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2. Principal Place of Business	3. Mailing Address	03012006 Chg-LP CR2E003 (11/05)
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Zip

	
4. FEI Number <b>20-275-7141</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

<b>8. Name and Address of Current Registered Agent</b>  HARTENSTINE, J. MICHAEL 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236	<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float:right">FL</span> Zip Code
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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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	HUDSON, GEORGE T TRUSTEE		
	1415 LADUE LANE		
	SARASOTA, FL 34231		
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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:** *George T Hudson* 3/1/06 941/922-1784  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE