

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

**FILED**  
**Apr 24, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A05000001027**

1. Entity Name  
EASTWOOD ASSOCIATES, L.L.P.



Principal Place of Business  
240 SOUTH PINEAPPLE AVE., 10TH FLOOR  
SARASOTA, FL 34236

Mailing Address  
P.O. BOX 49948  
SARASOTA, FL 34230-6948



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

03062006

Chg-LP

CR2E003 (11/05)

4. FEI Number

20-2885533

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BAND, DAVID S  
240 SOUTH PINEAPPLE AVE., 10TH FLOOR  
SARASOTA, FL 34236

Name

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 title if applicable.

DATE

**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 #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
BAND, DAVID S  
240 SOUTH PINEAPPLE AVE., 10TH FLOOR  
SARASOTA, FL 34236

13. ADDRESS CHANGES ONLY  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MCKAY, JOHN M  
1001 3RD AVE. WEST, SUITE 670  
BRADENTON, FL 34205

STREET ADDRESS  
CITY-ST-ZIP  
U00000533064  
05/06/06-80103-011 500.00

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ALLEN, RONALD J  
1001 3RD AVE. WEST, SUITE 600  
BRADENTON, FL 34205

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
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STREET ADDRESS  
CITY-ST-ZIP

STREET ADDRESS  
CITY-ST-ZIP

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

David S. Band, Gen Ptr

3/15/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE