


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

06 MAY -1 PM 2:35

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

DOCUMENT # A05000001166		
1. Entity Name VERANDA SHOPPES, LTD.		

Principal Place of Business 120 E PALMETTO PARK ROAD STE 410 BOCA RATON, FL 33432	Mailing Address 120 E PALMETTO PARK ROAD STE 410 BOCA RATON, FL 33432
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



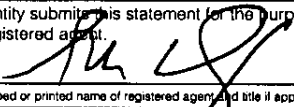
04212006 Chg-LP CR2E003 (11/05)

4. FEI Number 20-2982907	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
DOUGLAS, STEPHEN M 120 E PALMETTO PARK ROAD STE 410 BOCA RATON, FL 33432	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

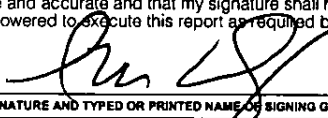
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE 4/28/06

FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00
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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 #	L05000058026	STREET ADDRESS	
NAME	VERANDA SHOPPES, LLC	CITY-ST-ZIP	
STREET ADDRESS	120 E PALMETTO PARK ROAD STE 410		
CITY-ST-ZIP	BOCA RATON, FL 33432		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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STREET ADDRESS			
CITY-ST-ZIP			

200075017502
05/22/06 01020 004 **500.00

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: 	DATE 4/28/06 (561) 394-7400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER	

STAPLE CHECK HERE