

# **2006 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000001564

**FILED**  
**Apr 29, 2006**  
**Secretary of State**

**Entity Name:** THE L. H. NORRIS FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

2301 S.E. 19TH PLACE  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

2301 S.E. 19TH PLACE  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 20-3268630

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TROIANO, JOSEPH A ESQ  
12800 UNIVERSITY PARK  
FORT MYERS, FL 33907 US

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

TROIANO, JOSEPH A ESQ  
12800 UNIVERSITY PARK, SUITE 380  
FORT MYERS, FL 33907 US

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: JOSEPH A. TROIANO

04/29/2006

Electronic Signature of Registered Agent

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: NORRIS, LOIS H TRUSTEE

Address: 2301 S.E. 19TH PLACE

City-St-Zip: CAPE CORAL, FL 33990

**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: JOSEPH A. TROIANO

RA

04/29/2006

Electronic Signature of Signing General Partner

Date