

# **2006 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A05000001808

**FILED**  
**Apr 02, 2006**  
**Secretary of State**

**Entity Name:** SATZMAN FAMILY LIMITED PARTNERSHIP

**Current Principal Place of Business:**

6773 INDIANWOOD WAY  
BOYNTON BEACH, FL 33437

**New Principal Place of Business:**

8500 W. SUNRISE BLVD.  
246  
PLANTATION, FL 33322

**Current Mailing Address:**

6773 INDIANWOOD WAY  
BOYNTON BEACH, FL 33437

**New Mailing Address:**

8500 W. SUNRISE BLVD.  
246  
PLANTATION, FL 33322

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

HOWARD K. COATES, JR., P.A.  
12012 SOUTH SHORE BOULEVARD, STE. 107  
WELLINGTON, FL 33414 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 #:

Name: SATZMAN, EDITH  
Address: 6773 INDIANWOOD WAY  
City-St-Zip: BOYNTON BEACH, FL 33437

**ADDRESS CHANGES ONLY:**

Address: 8500 W. SUNRISE BLVD., APT. 246  
City-St-Zip: PLANTATION, FL 33322

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: DAVID SATZMAN

VP

04/02/2006

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

\_\_\_\_\_  
Date