## 2006 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A05000001956

City-St-Zip:

LAKELAND, FL 33813 US

Entity Name: BADIOLA FAMILY LIMITED PARTNERSHIP

FILED Jul 18, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
	LANDS PLACE D, FL 33813 US			
Current M	ailing Address:	New Mailing Address:	New Mailing Address:	
	LANDS PLACE ), FL 33813 US			
FEI Number: In accordance	20-3663042 FEI Number Applied For ( ) se with s. 607.193(2)(b), F.S., the limited partners	FEI Number Not Applicable() ship did not receive the prior notice.	Certificate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and Address of	New Registered Agent:	
8706 MAPL TAMPA, FL	STRATEGIES LLC LE LAKE PLACE L 33635 US  named entity submits this statement for th	e purpose of changing its registered	office or registered agent, or both	
in the State		le purpose of changing its registered	office of registered agent, or both	
SIGNATUF	RE:			
	Electronic Signature of Registered A	Agent	Date	
GENERAL PARTNER INFORMATION:		ADDRESS CHANGES ONLY:	ADDRESS CHANGES ONLY:	
Document #:				
Name:	BADIOLA, DOMINIC C			
Address:	4726 HIGHLANDS PLACE CIRCLE	Address:		
City-St-Zip:	LAKELAND, FL 33813 US	City-St-Zip:		
Document #: Name:	PADIOLA NOEL CRACE C			
Address:	BADIOLA, NOEL-GRACE C 4726 HIGHLANDS PLACE CIRCLE	Address:		
City-St-Zip: Document #:	LAKELAND, FL 33813 US	City-St-Zip:		
Name:	BADIOLA, CATALINA C			
Address:	4726 HIGHLANDS PLACE CIRCLE	Address:		
City-St-Zip: Document #:	LAKELAND, FL 33813 US	City-St-Zip:		
Name:	BADIOLA, EVARISTO P			
Address:	4726 HIGHLANDS PLACE CIRCLE	Address:		

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.

City-St-Zip:

SIGNATURE: EVARISTO P BADIOLA MGR 07/18/2006