


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

<b>DOCUMENT # A05000002065</b>		
1. Entity Name <b>BLANCHARD TIMBER LLLP</b>		

Principal Place of Business <b>650 PINETREE ROAD WINTER PARK, FL</b>	Mailing Address <b>650 PINETREE ROAD WINTER PARK, FL</b>
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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

**FILED**  
06 MAR 06 MAY 11 PM 11:44  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA



03262006 Chg-LP CR2E003 (11/05)

4. FEI Number <b>20-3787962</b>		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>MARSHALL, PHILIP E 650 PINETREE ROAD WINTER PARK, FL 32789</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		<b>FL</b>	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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	<b>L05000109743</b>	STREET ADDRESS	
NAME	<b>MARSHALL REAL ESTATE VENTURES, LLC</b>	CITY - ST - ZIP	
STREET ADDRESS	<b>650 PINETREE ROAD</b>		
CITY - ST - ZIP	<b>WINTER PARK, FL 32789</b>		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
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CITY - ST - ZIP			

**800074699118**  
05/17/06--01005--013 \*\*\$00.00

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:** Philip E. Marshall **3/24/06 4072375895**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone #

STAPLE CHECK HERE