


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006

DOCUMENT # A05000002213		
1. Entity Name PEACOCK PARTNERS, LLLP		


Principal Place of Business 4530 CAMINO REAL SARASOTA, FL 34231	Mailing Address 4530 CAMINO REAL SARASOTA, FL 34231
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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 JUN -1 PM 3:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05172006 Chg-LP CR2E003 (11/05)

4. FEI Number 20-3946803	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
TURNER, JAMES L 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236		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 _____

Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$900.00
On or after September 6, 2006, Fee will be \$1000.00

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 #	L05000117580	STREET ADDRESS	
NAME	BTE, LLC	CITY-ST-ZIP	
STREET ADDRESS	4530 CAMINO REAL		
CITY-ST-ZIP	SARASOTA, FL 34231		
DOCUMENT #		STREET ADDRESS	100075901011
NAME		CITY-ST-ZIP	06/07/06--01010--008 **\$900.00
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

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: Helen T. Early 5/17/06 (941) 924-0375

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
HELEN T. EARLY, Manager of BTE, LLC

Date Daytime Phone #

STAPLE CHECK HERE