

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

**FILED**  
**Feb 24, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A06010**

1. Entity Name  
**SUGAR HILL, LTD.**



Principal Place of Business  
**516 LAKEVIEW ROAD, UNIT 8  
CLEARWATER, FL 33756**

Mailing Address  
**516 LAKEVIEW ROAD, UNIT 8  
CLEARWATER, FL 33756**



01172006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-1906855**

Applied For  
Not Applicable

5. Certificate of Status Desired

☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**THOMAS F. FLYNN  
516 LAKEVIEW ROAD, UNIT 8  
CLEARWATER, FL 33756**

**DO NOT WRITE  
IN THIS SPACE**

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

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**

DATE  
**000000445430  
03/07/06-80043-003 508.75**

**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

DOCUMENT # **P99000079745**  
NAME **SUGAR HILL ONE, INC.**  
STREET ADDRESS **516 LAKEVIEW ROAD, UNIT 8**  
CITY - ST - ZIP **CLEARWATER, FL 33756**

DOCUMENT # **F00000003282**  
NAME **BOSTON CAPITAL PARTNERS, INC.**  
STREET ADDRESS **ONE BOSTON PLACE**  
CITY - ST - ZIP **BOSTON, MA**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

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:   
As Vice-President of  
Corporate General Partner

02/15/2006 727-449-1182

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE