

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # A07231

1. Entity Name
CALLAHAN PLAZA ASSOCIATES, LTD.



Principal Place of Business

**1901 N.W. NORTH RIVER DR.
SUITE 109
MIAMI, FL 33125**

Mailing Address

**1901 N.W. NORTH RIVER DR.
SUITE 109
MIAMI, FL 33125**



04212006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1956854

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PRICE, KENNETH J
8475 S.W. 185TH TERRACE
MIAMI, FL**

**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 date if applicable

DATE

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

DOCUMENT #
NAME **PRICE, KENNETH J**
STREET ADDRESS **8475 SW 185 TERRACE**
CITY-ST-ZIP **MIAMI, FL 33157**

DOCUMENT #
NAME **PRICE, DENNIS J**
STREET ADDRESS **12733 83RD AVE NORTH**
CITY-ST-ZIP **SEMINOLE, FL 34846**

DOCUMENT #
NAME **FROST, GERALDINE A**
STREET ADDRESS **2512 CLARA KEE BLVD.**
CITY-ST-ZIP **TALLAHASSEE, FL 32303**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
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DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000560968
05/18/06-80061-003 500.00

**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: *Kenneth J. Price*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Kenneth J. Price-Partner 04/28/06 305-325-1357

Date

Daytime Phone #

STAPLE CHECK HERE