

2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006

DOCUMENT # A17624

1. Entity Name

TAMPA 301, LTD.



FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 FEB 24 AM 10:32

Principal Place of Business

3505 E. FRONTAGE RD., #115
 TAMPA FL 33607-7007

Mailing Address

3505 E. FRONTAGE RD., #115
 TAMPA FL 33607-7007

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

CS



1st MOORE

CR2E003 (10/05)

4. FEI Number

59-2439136

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

IRVING, PETER
 3505 E. FRONTAGE RD., #115
 TAMPA FL 33607-7007

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

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

DATE

FILE NOW!!! Fee is \$500. * After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.**

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 #
 NAME BAXTER, GEORGE J.
 STREET ADDRESS 4963 BACOPA LANE SO. APT 803
 CITY-ST-ZIP ST. AUGUSTINE FL 33715

STREET ADDRESS

CITY-ST-ZIP

St. Petersburg

DOCUMENT #
 NAME IRVING, PETER
 STREET ADDRESS 14900 GULF BLVD #402
 CITY-ST-ZIP MEDEIRA BEACH FL 33708

STREET ADDRESS

CITY-ST-ZIP

100067189681
 03/07/06--01007--005 **\$500.00

DOCUMENT #
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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:

Peter Irving

Peter Irving, Gen. Ptn.

2/9/06

813-282-1873

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE