


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

FILED
Feb 23, 2006 08:00 AM
Secretary of State

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| DOCUMENT # A18185 1. Entity Name PATRONIS BROTHERS ENTERPRISES LIMITED PARTNERSHIP |  |
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| Principal Place of Business 5551 NORTH LAGOON DRIVE PANAMA CITY BEACH FL 32407 | Mailing Address 5551 NORTH LAGOON DRIVE PANAMA CITY BEACH FL 32407 |
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| 2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country | 3. Mailing Address Suite, Apt. #, etc. City & State Zip Country |
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1st MOORE CR2E003 (10/05)

4. FEI Number **59-1196053** Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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| 6. Name and Address of Current Registered Agent PATRONIS, JIMMY T. 5551 N. LAGOON DR. PANAMA CITY BEACH FL 32407 | 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code |
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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. * 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 | |
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| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | PATRONIS, JIMMY T. 3144 N KINGS DRIVE PANAMA CITY FL | STREET ADDRESS CITY-ST-ZIP | |
| DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP | PATRONIS, JOHNNY T. 3613 DELWOOD DRIVE PANAMA CITY FL | STREET ADDRESS CITY-ST-ZIP | U00000445037 03/07/06-80025-013 500.00 |
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STAPLE CHECK HERE

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: *J. Patronis*

2/14/06