


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

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A18789**

1. Entity Name  
**SETTLERS REST R.V. PARK, LTD.**



Principal Place of Business 37549 CHANCEY ROAD OFFICE ZEPHYRHILLS, FL 33541	Mailing Address 37549 CHANCEY ROAD OFFICE ZEPHYRHILLS, FL 33541
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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

02102006 Chg-LP CR2E003 (11/05)

4. FEI Number 59-2093817	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  <b>BETTY MEENGs ANDERS</b> <b>37549 CHANCEY ROAD</b> <b>OFFICE</b> <b>ZEPHYRHILLS, FL 33541</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 \$500.00**  
**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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	MEENGs, BETTY G.	STREET ADDRESS	
NAME	37351 CR 54	CITY-ST-ZIP	
STREET ADDRESS	ZEPHYRHILLS, FL		
CITY-ST-ZIP			
DOCUMENT #	MEENGs, JOHN M.	STREET ADDRESS	110000463450
NAME	37549 CHANCEY ROAD	CITY-ST-ZIP	03/22/06-80040-001 500.00
STREET ADDRESS	ZEPHYRHILLS, FL		
CITY-ST-ZIP			
DOCUMENT #	MEENGs, MARTA K.	STREET ADDRESS	
NAME	37351 CR 54	CITY-ST-ZIP	
STREET ADDRESS	ZEPHYRHILLS, FL		
CITY-ST-ZIP			
DOCUMENT #	MEENGs, MELINDA J.	STREET ADDRESS	
NAME	37351 CR 54	CITY-ST-ZIP	
STREET ADDRESS	ZEPHYRHILLS, FL		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

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: John M. Meengs (John M. Meengs) 2-22-06 813-782-2003  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #