2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # A25063

1. Entity Name
TOBER ASSOCIATES, LTD.

Principal Place of Business	Mailing Address
581705 WHITE OAK ROAD YULEE, FL 32097	581705 WHITE OAK ROAD YULEE, FL 32097

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

02072006 Chg-LP CR2E003 (11/05)

4. FEI Number
13-3420664
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
SIEGEL, JEROME A 581705 WHITE OAK ROAD YULEE, FL 32097	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 ______________________ 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 #	J88450	STREET ADDRESS	
NAME	TOBER CAPITAL CORPORATION		
STREET ADDRESS	581705 WHITE OAK ROAD	CITY-ST-ZIP	
CITY-ST-ZIP	YULEE, FL 32097		
DOCUMENT #		STREET ADDRESS	
NAME	BERGREEN, BERNARD D		
STREET ADDRESS	1060 FIFTH AVENUE	CITY-ST-ZIP	U00000433363 02/24/06--80014-018 500.00
CITY-ST-ZIP	NEW YORK, NY 10128		
DOCUMENT #		STREET ADDRESS	
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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: Jerome A Siegel, Jerome A. Siegel 2/7/06 212-410-4845
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER | Date | Daytime Phone #