

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

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

DOCUMENT # A29295

1. Entity Name
DUNEDIN MINI WAREHOUSE, LLLP



Principal Place of Business
**401 S. OLD WOODWARD
STE. #470
BIRMINGHAM, MI 48009**

Mailing Address
**401 S. OLD WOODWARD
STE. #470
BIRMINGHAM, MI 48009**



01072006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
38-2898335

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent

**REGAN, HAROLD
1017 THOMASVILLE ROAD STE. A
TALLAHASSEE, FL 32303**

**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 title 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
STREET ADDRESS
CITY- ST- ZIP
**COHN, SIDNEY L.
6589 PLEASANT LAKE COURT
WEST BLOOMFIELD, MI 48322**

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP
**PERLMAN, STUART
8110 ROCKY SPRING ROAD
BLOOMFIELD HILLS, MI 48301**

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY- ST- ZIP

DOCUMENT #
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DOCUMENT #
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CITY- ST- ZIP

000000433314
02/24/06-80013-006 500.00

**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:

Stuart Perlman
STUART PERLMAN

8/1/06 248-258-8820
Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER