

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # A31065

1. Entity Name
JENNEWEN ENTERPRISES, LTD.



Principal Place of Business
**4710 CLEAR AVENUE
TAMPA, FL 33629**

Mailing Address
**4710 CLEAR AVENUE
TAMPA, FL 33629**



01182008 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3045595

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**JENNEWEN, JAMES J.
4710 CLEAR AVENUE
TAMPA, FL 33629**

**DO NOT WRITE
IN THIS SPACE**

7. 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	JENNEWEN, JAMES J.
STREET ADDRESS	4711 CLEAR AVENUE
CITY-STATE-ZIP	TAMPA, FL
DOCUMENT #	
NAME	JENNEWEN, JOAN W.
STREET ADDRESS	4711 CLEAR AVENUE
CITY-STATE-ZIP	TAMPA, FL
DOCUMENT #	
NAME	JENNEWEN, JONATHAN P
STREET ADDRESS	101 E KENNEDY BLVD STE 3700
CITY-STATE-ZIP	TAMPA, FL 33602
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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04/11/06-80088-023 500.00

**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:

JAMES J. JENNEWEN **3/23/06** **2860744**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DATE

DAYTIME PHONE #

STAPLE CHECK HERE