2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

EFF

SIGNATURE:

Jan 23, 2006 08:00 AM Secretary of State DOCUMENT # A31306 1. Entity Name SQF, LTD. Principal Place of Business Mailing Address 102 BUCKSKIN LANE **102 BUCKSKIN LANE** ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174 01182008 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0249964 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent QUANDT-FREW, SABINA DO NOT WRITE 102 BUCKSKIN LANE ORMOND BEACH, FL 32174 IN THIS SPACE . 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, typed or primed name of regretered agent and title if applicable DATE FILE NOW!!! FEE 13 \$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 # QUANDT-FREW, SABINA NAME STREET ADDRESS 102 BUCKSKIN LANE U00000396534 01/30/06-80013-014 508.75 CHY-ST-ZP ORMOND BEACH, FL OCCUMENT # NAME STREET ADDRESS CITY-ST-ZP DOCUMENT # DO NOT WRITE STREET ACCORESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # MASKE STREET ADORESS CHY-SI-ZP DOCUMENT 4 STAPLE CHECK NAME STREET ADDRESS CITY-ST-ZP DDC2MENT # NAME STREET ADORESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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

MATURE AND TYPED OR PRINTED NAME OF SIGNING COMERAL PARTNESS

FILED