


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 FEB -8 AM 10:42

DOCUMENT # A33353 1. Entity Name LAKE LAND MOTORS LIMITED PARTNERSHIP	
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Principal Place of Business 250 SOUTH OCEAN BLVD. APT. 16AB BOCA RATON, FL 33432	Mailing Address 250 SOUTH OCEAN BLVD. APT. 16AB BOCA RATON, FL 33432
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2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	c/o Percontee, Inc.	
	11900 Tech Road	
City & State	City & State	
	Silver Spring MD	
Zip	Country	
	20904 US	

01252006 Chg-LP CR2E003 (11/05)

4. FEI Number	59-3145425	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 GUDELSKY, MARTHA 250 SOUTH OCEAN BLVD. APT. 16AB BOCA RATON, FL 33432	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>
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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 #	P92000014069	STREET ADDRESS	
NAME	MGA INVESTMENTS, INC.	CITY-ST-ZIP	
STREET ADDRESS	250 SOUTH OCEAN BLVD., APT. 16AB		
CITY-ST-ZIP	BOCA RATON, FL 33432		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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STREET ADDRESS			
CITY-ST-ZIP			

500065862055
 02/15/06--01004--007 **500.00

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:  1/31/06 30-622-0100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

START HERE - CHECK HERE