

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 07, 2006 08:00 AM
Secretary of State

DOCUMENT # A33383 1. Entity Name JANARIOUS FAMILY, LTD.					
Principal Place of Business 1404 GRANDVIEW BLVD. KISSIMMEE, FL 34744			Mailing Address 1404 GRANDVIEW BLVD. KISSIMMEE, FL 34744		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-3141399	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent JANARIOUS, FRANCIS B 1404 GRANDVIEW BLVD. KISSIMMEE, FL 34744				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE <u><i>Francis B Janarius</i></u> IVR <u><i>4-5-2006</i></u> <small>Signature, typed or printed name of registered agent and date if applicable</small>					
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 #	NAME		STREET ADDRESS		
NAME	JANARIOUS, FRANCIS B.		CITY-ST-ZIP		
STREET ADDRESS	1404 GRANDVIEW BLVD.		CITY-ST-ZIP		
CITY-ST-ZIP	KISSIMMEE, FL 34744		CITY-ST-ZIP		
DOCUMENT #	NAME		STREET ADDRESS		
NAME	JANARIOUS, MARY K.		CITY-ST-ZIP		
STREET ADDRESS	1404 GRANDVIEW BLVD.		CITY-ST-ZIP		
CITY-ST-ZIP	KISSIMMEE, FL 34744		CITY-ST-ZIP		
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STREET ADDRESS			CITY-ST-ZIP		
CITY-ST-ZIP			CITY-ST-ZIP		
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: <u><i>Francis B Janarius</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			Date <u><i>4-5-2006</i></u> (407) 744-212		



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