

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

06 MAY 2006 - PM 1:33:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04182006 Chg-LP CR2E003 (11/05)

4. FEI Number 65-0403549 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

BOYLE, CONRAD J ESQ.
C/O MOMBACH, BOYLE & HARDIN, P.A.
500 EAST BROWARD BLVD., SUITE 1950
FT. LAUDERDALE, FL 33394

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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

DOCUMENT # P93000022006
NAME KEENAN GROUP, INC.
STREET ADDRESS 1900 W COMMERCIAL BLVD, SUITE 200
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

DOCUMENT # P93000021955
NAME KEISER BUILDING CORP.
STREET ADDRESS 1500 NW 49TH STREET, #100
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS 1900 W. Commerical Blvd., Suite 175
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP 000074756500
05/17/06--01019--018 **500.00

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
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: KEENAN GROUP INC. AS G.P.
[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER AS G.P.

Date Apr 18/06 Daytime Phone # _____

STAPLE CHECK HERE