


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # A93000000782 1. Entity Name JOSEPH K. LOPEZ, SR., FAMILY PARTNERSHIP, LTD.	
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Principal Place of Business 501 EAST KENNEDY BOULEVARD, SUITE 1700 TAMPA, FL 33602	Mailing Address 501 EAST KENNEDY BOULEVARD, SUITE 1700 TAMPA, FL 33602
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DO NOT WRITE IN THIS SPACE



04072006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 59-3193282	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

LOPEZ, JOSEPH K SR.
501 EAST KENNEDY BLVD., SUITE 1700
TAMPA, FL 33602

DO NOT WRITE IN THIS SPACE

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 05/08/06-80049-013 500.00

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 #	NAME
NAME	LOPEZ, JOSEPH K SR.
STREET ADDRESS	501 EAST KENNEDY BLVD., SUITE 1700
CITY-ST-ZIP	TAMPA, FL 33602
DOCUMENT #	NAME
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STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	

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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:  **Joseph K. Lopez, Sr.** **813-228-7411**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE