


2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006

FILED
Feb 16, 2006 08:00 AM
Secretary of State

DOCUMENT # A94000000245					
1. Entity Name MAIORIELLOS LTD.					
Principal Place of Business 68 ANCHOR LANE SANTA ROSA BEACH FL 32459			Mailing Address 68 ANCHOR LANE SANTA ROSA BEACH FL 32459		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3213060	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
5. Name and Address of Current Registered Agent MAIORIELLO, JOSEPH J III 68 ANCHOR LANE SANTA ROSA BEACH FL 32459				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.					



1st MOORE CR2E003 (10/05)

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! Fee is \$500. * After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.**

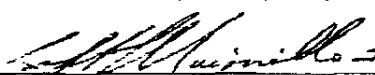
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	
NAME	MAIORIELLO, JOSEPH J III	CITY-ST-ZIP	
STREET ADDRESS	68 ANCHOR LANE		
CITY-ST-ZIP	SANTA ROSA BEACH FL 32459		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	MAIORIELLO, LORRAINE T	CITY-ST-ZIP	
STREET ADDRESS	68 ANCHOR LANE		
CITY-ST-ZIP	SANTA ROSA BEACH FL 32459		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	MAIORIELLO, JOSEPH J IV	CITY-ST-ZIP	
STREET ADDRESS	14 MINE ROAD		
CITY-ST-ZIP	OLEY PA 19547		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	MAIORIELLO, CAROLE L	CITY-ST-ZIP	
STREET ADDRESS	614 SPRUCE HILL ROAD		
CITY-ST-ZIP	OTTSVILLE PA 18942		
DOCUMENT #	NAME	STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
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CITY-ST-ZIP			

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02/27/06-80014-005 500.00

STAPLE CHECK HERE

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 J. MAIORIELLO III** 2/12/05