

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 06 APR 24 AM 11:14

<b>DOCUMENT # A94000001077</b> 1. Entity Name A&M OF HENDRY COUNTY, LTD.					
Principal Place of Business 5430 PROCTOR ROAD SARASOTA, FL 34233			Mailing Address 5430 PROCTOR ROAD SARASOTA, FL 34233		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent  STRODE, WILLIAM C 720 SO. ORANGE AVE. SARASOTA, FL 34236				7. Name and Address of New Registered Agent Name: <u>DAVID M. SILBERSTEIN</u> Street Address (P.O. Box Number is Not Acceptable): <u>120 S. ORANGE AVE.</u> City: <u>SARASOTA</u> FL <u>34236</u>	
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: <u>4/11/06</u>	
<b>FILE NOW!!! FEE IS \$500.00</b> <b>After May 1, 2006, Fee will be \$900.00</b>					
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	P94000053150		STREET ADDRESS		
NAME	A&M MANAGEMENT OF HENDRY COUNTY, INC.		CITY-ST-ZIP		
STREET ADDRESS	5430 PROCTOR RD.				
CITY-ST-ZIP	SARASOTA, FL 34233				
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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:			Date: <u>4/7/06</u> Daytime Phone #: <u>941-925-7155</u>		

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