

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

**FILED**  
**Apr 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A94000001140**

1. Entity Name  
**BECKS MOBILE HOME PARK LIMITED PARTNERSHIP**



Principal Place of Business  
P.O. DRAWER 2140  
DAYTONA BEACH, FL 32215

Mailing Address  
P.O. DRAWER 2140  
DAYTONA BEACH, FL 32215



04122006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3266474**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

BECKS, BERRIEN H JR.  
125 NORTH RIDGEWOOD AVENUE  
DAYTONA BEACH, FL 32115

**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 \_\_\_\_\_

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

DATE \_\_\_\_\_

**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 # **P94000050466**  
NAME **BECKS MOBILE HOME PARK, INC.**  
STREET ADDRESS **125 NORTH RIDGEWOOD AVENUE**  
CITY - ST - ZIP **DAYTONA BEACH, FL 32115**

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000000515087  
04/29/06-80192-021 500.00

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IN THIS SPACE**

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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4-14-06 (386) 7527100

STAPLE CHECK HERE