


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

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

DOCUMENT # A95000000837
 1. Entity Name
SPANISH WELLS PROPERTIES LIMITED PARTNERSHIP



Principal Place of Business
P.O. BOX 366879
BONITA SPRINGS, FL 34136

Mailing Address
P.O. BOX 366879
BONITA SPRINGS, FL 34136



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01122006 Chg-LP CR2E003 (11/05)

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SPANISH WELLS LAND INC. 24890 BURNT PLACE, SUITE 6-9 BONITA SPRINGS, FL 34135		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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	F95000000343	STREET ADDRESS	
NAME	SPANISH WELLS LAND INC.	CITY-ST-ZIP	
STREET ADDRESS	P.O. BOX 366879		
CITY-ST-ZIP	BONITA SPRINGS, FL 34136		
DOCUMENT #		STREET ADDRESS	000000514414
NAME		CITY-ST-ZIP	04/29/06-80171-001 500.00
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STREET ADDRESS			
CITY-ST-ZIP			

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: Rodney A. Welby, AS/D - Spanish Wells Land, Inc. 4/12/06 (630) 584-6580
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #