

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

**FILED  
Mar 13, 2006 08:00 AM  
Secretary of State**

DOCUMENT # A95000001269	
1. Entity Name OKEE LOT, LTD.	

Principal Place of Business 800 NORTH FLAGLER DRIVE WEST PALM BEACH, FL 33401	Mailing Address 800 NORTH FLAGLER DRIVE WEST PALM BEACH, FL 33401
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**DO NOT WRITE IN THIS SPACE**

01132006 No Chg-LP	CR2E003 (11/05)
4. FEI Number 65-0605253	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

ARSENAULT, GERARD A  
800 NORTH FLAGLER DRIVE  
WEST PALM BEACH, FL 33401

**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 \_\_\_\_\_  
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 STREET ADDRESS CITY - ST - ZIP	P85000065169 OKEE LOT, INC. 800 NORTH FLAGLER DRIVE WEST PALM BEACH, FL 33401
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03/22/06-80011-016 500.00

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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: *Henry Hamilton* 2/23/06 561-655310  
Signature and Typed or Printed Name of Signing General Partner Date Daytime Phone #