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

### DOCUMENT # A96000000223

Entity Name

BYRÓ BEACH ESTATES, LTD.



SECRETARY OF STATE DIVISION OF CORPORATIONS

06 APR 24 AM 10: 39

Principal Place of Business

301 YAMATO ROAD

#3101 BOCA RATON, FL 33431 Mailing Address

301 YAMATO ROAD

#3101

BOCA RATON, FL 33431



### DO NOT WRITE IN THIS SPACE

03132006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
65-0712678

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

STOLTZ II, MORRIS L 301 YAMATO ROAD SUITE 3101 BOCA RATON, FL 33431

## DO NOT WRITE IN THIS SPACE

| 8. The above named entity submits this statement for the purpose of changi<br>the obligations of registered agent. | ng its registered office o | r registered agent, or both | , in the State of Florida. | I am familiar with, and | accept |
|--|----------------------------|-----------------------------|----------------------------|-------------------------|--------|
| SIGNATURE -  |                            |                             |                            |                         | _      |

#### 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.

| Į | 12.            | GENERAL PARTNER INFORMATION |  |  |
|---|----------------|-----------------------------|--|--|
|   | DOCUMENT #     | P96000037384                |  |  |
|   | NAME           | STOLTZ ESTATES HOMES, INC.  |  |  |
| - | STREET ADDRESS | 301 YAMATO ROAD, SUITE 3101 |  |  |
|   | CITY-\$T-ZIP   | BOCA RATON, FL 33431        |  |  |
|   | DOCUMENT #     |                             |  |  |
|   | NAME           |                             |  |  |
|   | STREET ADDRESS |                             |  |  |
| - | CITY SI ZIP    |                             |  |  |
|   | DOCUMENT #     |                             |  |  |
|   | NAME           |                             |  |  |
| ļ | STREET ADDRESS |                             |  |  |
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| } | NAME           |                             |  |  |
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| ĺ | DOCUMENT #     |                             |  |  |
|   | NAME           |                             |  |  |
|   | STREET ADDRESS |                             |  |  |
| 1 | CITY-ST-ZIP    |                             |  |  |
|   | DOCUMENT #     |                             |  |  |
|   | NAME           | <u> </u>                    |  |  |
| Ì | STREET ADDRESS |                             |  |  |
|   | CITY OF 7ID    |                             |  |  |

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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 empower of the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empower of the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empower of the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empower of the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empower of the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empower of the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empower of the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empower of the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empower of the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the same legal effect as if made under oath; that I am a General Partner oath legal effect as if made under oath; the limited

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/14/06

Daytime Phone #