


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

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

**DOCUMENT # A96000000505**  
 1. Entity Name  
**MAZOUREK ENTERPRISES, LTD.**



Principal Place of Business  
**21224 NEVITT HILL ROAD**  
**BROOKSVILLE, FL 34601**

Mailing Address  
**PO BOX 578**  
**BROOKSVILLE, FL 34605**

**DO NOT WRITE IN THIS SPACE**



01052006 No Chg-LP      CR2E003 (11/05)

4. FEI Number  
**59-3368421**      Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent

**MAZOUREK, ALVIN R**  
**201 HOWELL AVE., STE. 300**  
**BROOKSVILLE, FL 34601**

**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	MAZOUREK, JENNIE
STREET ADDRESS	21224 NEVITT HILL ROAD
CITY-ST-ZIP	BROOKSVILLE, FL 34601
DOCUMENT #	
NAME	MAZOUREK, ALVIN R
STREET ADDRESS	201 HOWELL AVE., STE. 300
CITY-ST-ZIP	BROOKSVILLE, FL 34601
DOCUMENT #	
NAME	MAZOUREK, GEORGE C
STREET ADDRESS	21224 NEVITT HILL ROAD
CITY-ST-ZIP	BROOKSVILLE, FL 34601
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100000514667  
 04/29/06-80181-013 500.00

**DO NOT WRITE IN THIS SPACE**

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: George C. Mazourek      Date: 4/13/06      Daytime Phone #: (352) 796-3732

**GEORGE C. MAZOUREK**