2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 6, 2006

SIGNATURE:

DOCUMENT # A9600@QQQ703 FILED SECRETARY OF STATE DIVISION OF CORPORATIONS SCHWERER FAMILY PARTNERS, LTD. 06 AUG -3 AM 9:50 Principal Place of Business Mailing Address 4634 S 25TH ST. 4634 S 25TH ST. FORT PIERCE, FL 34981 FORT PIERCE, FL 34981 07182006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0659103 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SCHWERER, JOHN A DO NOT WRITE Z06.S-STH STREET FT PIERCE FL 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. u FILE NOW!!! FEE IS \$900.00 On or after September 6, 2006, Fee will be \$1000.00 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. GENERAL PARTNER INFORMATION 12. DOCUMENT # NAME SCHWERER, JOHN A STREET ADDRESS 4634 S 25TH STREET CITY-ST-ZIP FORT PIERCE, FL 34981 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME *CIREET ADDRESS GIY-SI-ZIP 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