2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

FILED Apr 24, 2006 08:00 Al Secretary of State **DOCUMENT # A96000000809** 1. Entity Name ANDREA LANE, LTD. Mailing Address Principal Place of Business 8250 COLLEGE PARKWAY, #201 8250 COLLEGE PARKWAY, #201 FORT MYERS, FL 33919 FORT MYERS, FL 33919 04052006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0678570 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent LEVAN, TERRIS T DO NOT WRITE 8250 COLLEGE PARKWAY, #201 FORT MYERS, FL 33919 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 Signature, upad 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 P96000036466 DOCUMENT # U00000530606 NAME GDT, INC. OF SOUTH FLORIDA 05/06/06-80004-010 500.00 STREET ADDRESS 8250 COLLEGE PARKWAY, #201 CITY-ST-ZIP FORT MYERS, FL 33919 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 # STAPLE CHECK MAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # HAME STREET ADDRESS CITY-ST-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 mat my signature shall have the same legal effect as if made under cath; 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 GDT, Freid S. Place DA