

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

SEC. OF STATE
 DIVISION OF REVENUE
 06 FEB -8 AM 9:58

DOCUMENT # A96000001104 1. Entity Name CHRISTOPHER PROPERTIES, LTD.					
Principal Place of Business 3324 SOUTH MACDILL AVENUE TAMPA, FL 33629			Mailing Address 3324 SOUTH MACDILL AVENUE TAMPA, FL 33629		
2. Principal Place of Business		3. Mailing Address 100 2nd Ave S.			
Suite, Apt. #, etc.		Suite, Apt. #, etc. #904			
City & State		City & State St. Petersburg, FL			
Zip	Country	Zip 33701-4337	Country USA.	4. FEI Number 59-3381907	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVENUE MIAMI, FL 33131			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
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			13. ADDRESS CHANGES ONLY		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P96000018752 B.C. TAMPA PROPERTIES, INC. 3324 S. MACDILL AVENUE TAMPA, FL 33629		STREET ADDRESS CITY-ST-ZIP	700066121817 02/17/06 01010 015 **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

[Handwritten Signature] Feb 6/06