2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Mar 08, 2006 08:00 AM Secretary of State

Due By May 1, 2006				Secretary of State	
1. Entity Nam	MENT # A9600000 ND BUSINESS PARK, L'			Secre	iary or State
Principal Place of Business 4320 WOODLAND PARK DR. WEST MELBOURNE, FL 32904 Mailing Address 4320 WOODLAND PARK DR. WEST MELBOURNE, FL 32904					
	AC NOT WIDST	E IN THE COA		01032006 No Chg-LP	CR2E003 (11/05)
D	O NOT WRIT	E IN THIS SPA	ICE	4. FE! Number 59-3389936	Applied For Not Applicable
Í				5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Curre	nt Registered Agent		<u> </u>	
CIA DEVELOPMENT, INC. 4320 WOODLAND PARK DR. WEST MELBOURNE, FL 32904				DO NOT W IN THIS SP	
	ions of registered agent. Signature, typed or orinted name of registered ag	t for the purpose of changing its registred and the Respirable.	ered office or register	red agent, or both, in the State of Flo	onte
	After May 1 A GENERAL PARTNER	, 2006, Fee will be \$900.00 R THAT IS A BUSINESS ENTITY			
12.		MAY NOT be changed on the for VER INFORMATION	m; an amendmer	nt must be filed to change a ge	eneral partner.
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP	P94000050548 CIA DEVELOPMENT, INC. 4320 WOODLAND PARK DR. WEST MELBOURNE, FL. 329	-			
OCCUMENT / NAME STREET ADDRESS CHY-ST-ZIP				000000-03/18/06	459257 80025-013 500.00
OCCUMENT # NAME STREET ADDRESS CHY-ST-ZIP				DO NOT WE	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPA	ACE
OGCUMENT F NAME STREET ADDRESS CITT - ST - ZIP					
DOCUMENT F					

14. I hereby certify that the information supplied with this filling 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 cath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute his report as required by Chapter 820, Florida Statutes.

SIGNATURE:

STREET ADDRESS CTTY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

W. ROSCH ANDERSON VA.

321-723-3400

Daytime Florus #