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

## DOCUMENT # A97000000809

1. Entity Name
THE JOHN FOSTER AND ELIZABETH G. MARTIN FAMILY
LIMITED PARTNERSHIP

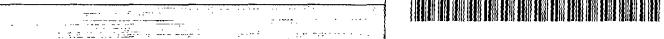


FILED Mar 13, 2006 08:00 AM Secretary of State

Principal Place of Business

109 CEDAR POINT LANE LONGWOOD, FL 32779 Mailing Address

109 CEDAR POINT LANE LONGWOOD, FL 32779



DO NOT WRITE IN THIS SPACE

03032006 No Chg-LP CRZE003 (11/05)

4. FEI Number 59-3446032

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARTIN, SHERI E 109 CEDAR POINT LANE LONGWOOD, FL 32779

CITY-ST-ZP

DOCUMENT #

NAME

STREET ADDRESS
CITY-ST-ZP

DOCUMENT #

NAME

STREET ADDRESS
CITY-ST-ZP

## DO NOT WRITE IN THIS SPACE

		Manager and the state of the st
8. The above the obliga	e named entity submits this statement for the purpose of changing tions of registered agent.	its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept IIIIIIIIII464828
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.		U3/22/TE-80011-012 500 00
	FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$9	00.00
		ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. The form; an amendment must be filed to change a general partner.
12.	GENERAL PARTNER INFORMATION	Control of the contro
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	J.F. MARTIN LLC 109 CEDAR POINT LANE LONGWOOD, FL 32779	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		
DOCUMENT / NAME STREET ADDRESS CITY-SI-ZIP		DO NOT WRITE
DOCUMENT # NAME STREET ADDRESS		IN THIS SPACE

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 path; 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: Elizabeth & Martin - Flizabeth Q. Martin 3/9/06 407-869-9129