


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

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

**DOCUMENT # A97000000823**  
1. Entity Name  
**RISSMAN FAMILY PARTNERSHIP, LTD.**



Principal Place of Business  
**10833 BAYSHORE DRIVE  
WINDERMERE, FL 34786**

Mailing Address  
**10833 BAYSHORE DRIVE  
WINDERMERE, FL 34786**

**DO NOT WRITE IN THIS SPACE**



02072006 No Chg-LP CR2E003 (11/05)

4. FEI Number <b>59-3441204</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**RISSMAN CORP.  
10833 BAYSHORE DRIVE  
WINDERMERE, FL 34786**

**DO NOT WRITE  
IN THIS SPACE**

6. 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 \_\_\_\_\_  
Signature, typed 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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	P97000033438 RISSMAN CORP. 10833 BAYSHORE DRIVE WINDERMERE, FL 34786
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00000465513  
03/22/06-40040-008 500.00

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

SIGNATURE: St A. Riz 3/9/06 407 8390120  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #