2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # A97000000875

1. Entity Name
INELL STINE FAMILY PARTNERSHIP, LTD.

Principal Place of Business	Mailing Address
2209 THONOTOSASSA ROAD PLANT CITY, FL 33566	2209 THONOTOSASSA ROAD PLANT CITY, FL 33566

03312006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3445307
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STINE, INELL M
2209 THONOTOSASSA ROAD
PLANT CITY, FL 33566

DO NOT WRITE 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 _____ 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	STINE, INELL M
STREET ADDRESS	2209 THONOTOSASSA ROAD
CITY-ST-ZIP	PLANT CITY, FL 33566
DOCUMENT #	
NAME	STINE, DONALD K
STREET ADDRESS	2812 JOHN MOORE ROAD
CITY-ST-ZIP	BRANDON, FL 33511
DOCUMENT #	
NAME	MCAULEY, PENNY S
STREET ADDRESS	1110 SANDPIPER COURT
CITY-ST-ZIP	LAKELAND, FL 33813
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/29/06-80185-018 500.00

DO NOT WRITE IN THIS SPACE

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: Inell Stine 4.12-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #