2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006

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Feb 20, 2006 08:00 AM DOCUMENT # A97000001089 **Secretary of State** 1. Entity Name WHITE EDELWEISS, LIMITED PARTNERSHIP Mailing Address Principal Place of Business 6911 RIVERVIEW BOULEVARD N.W. BRADENTON FL 34209 6911 RIVERVIEW BOULEVARD N.W. BRADENTON FL 34209 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E003 (10/05) 4. FEI Number Applied For City & State City & State 65-0753296 Not Applicat \$8.75 Additional Country Zια Country Zio 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KEENE, WILLIAM Street Address (P.O. Box Number is Not Acceptable) 601 93RD AVENUE NORTH ST. PETERSBURG FL 33702 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered affect or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable DATE FILE NOW!!! Fee is \$500, *** After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State. 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. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY 12. DOCUMENT # STREET ACCRESS WHITE, LESLIE R 23,552 STREET ADDRESS 6911 RIVERVIEW BLVD., NW CITY-ST-AP CITY-SI-ZIP ST PETERSBURG FL 33702 U000000440194 DOCUMENT # STREET ADDRESS 03/02/06-8003**1-010 500.0**0 NAME WHITE, BEVERLY F STREET ADDRESS 6911 RIVERVIEW BLVD., NW CITY - ST- ZIP CITY-ST-Z82 **BRADENTON FL 34209** OGCUMENT # STREET ADDRESS STREET ADDRESS COY-ST-ZIP CUY-ST-78P DOCUMENT # STREET ADDRESS NAME STREET AGORESS CHY-ST-ZIP CAY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-S7-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP 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

general Plux, 2-16-06

FILED