2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED May 01, 2006 08:00 AN Secretary of State

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1. Entity Name

EAST COAST LAND, LTD.



Principal Place of Business

Mailing Address

1350 EAST NEWPORT CENTER DRIVE, SUITE 206 DEERFIELD BEACH, FL 33442

P.O. BOX 4219

DEERFIELD BEACH, FL 33442-4219



DO NOT WRITE IN THIS SPACE

04212006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 65-0763006

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional \mathbf{Z} Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

KAY, JAMES R ESQ. KAY LAW OFFICES 700 VILLAGE SQUARE CROSSING., STE 102B PALM BEACH GARDENS, FL 33410

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The above named entity submits this statement for the purpose of changing its registered office or rethe obligations of registered agent.	egistered agent, or both, in the State of Florida.	I am familiar with, and accept
SIGNATURE	·	

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 #	A97000001290
	NAME	O&SLAND, LTD.
	STREET ADDRESS	1350 EAST NEWPORT CENTER DRIVE, SUITE 206
	CHY-SI-ZIP	DEERFIELD BEACH, FL 33442
	DOCUMENT #	
	NAME	
	STREET ADDRESS	
	CITY-ST-ZIP	
	DOCUMENT#	
	NAME	
	STREET ADDRESS	
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	STREET ADDRESS	
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	DOCUMENT #	
	NAME	
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В	CITY-ST-ZIP	
4	DOCUMENT #	
15	NAME	

U00000557429 05/17/06-80050-009 508.75

DATE

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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:

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Linda G. Kassof

04/27/2006

(954) 428-4585

Daytime Phone #