


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

**FILED  
Jan 23, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # A97000002056**  
1. Entity Name  
**VISTA 4 LTD.**



Principal Place of Business  
**7050 AUGUSTA NATIONAL DRIVE  
ORLANDO, FL 32822**

Mailing Address  
**7050 AUGUSTA NATIONAL DRIVE  
ORLANDO, FL 32822**

2. Principal Place of Business  
3. Mailing Address

Suite, Apt. #, etc.  
Suite, Apt. #, etc.

City & State  
City & State

Zip Country Zip Country



01052006 Chg-LP CR2E003 (11/05)

4. FEI Number  
**59-3476443**

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**LEE, RICHARD T  
7050 AUGUSTA NATIONAL DRIVE  
ORLANDO, FL 32822**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

**I, the above named entity, submit 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 file 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 |  | 13. ADDRESS CHANGES ONLY |  |
|---------------------------------|--|--------------------------|--|
| DOCUMENT #<br>H20098            | LEE PROPERTIES, INC.<br>7050 AUGUSTA NATIONAL DRIVE<br>ORLANDO, FL 32822 | STREET ADDRESS           |  |
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01/31/06-80025-005 500.00

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:** Richard T. Lee **1-16-06** **407-857-2835**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #