


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

| | |
|---|---|
| DOCUMENT # A97000002549 1. Entity Name O & E PARTNERS, LTD. |  |
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|---|---|
| Principal Place of Business 3700 N.W. 91ST STREET A-100 GAINESVILLE, FL 32606 | Mailing Address 3700 N.W. 91ST STREET A-100 GAINESVILLE, FL 32606 |
|---|---|

| | | | |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business | | 3. Mailing Address | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State | | City & State | |
| Zip | Country | Zip | Country |

04102006 Chg-LP CR2E003 (11/05)

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|------------------------------------|---|
| 4. FEI Number 59-6237090 | <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
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|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|---------------------------------------|

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|---|--|
| 6. Name and Address of Current Registered Agent | |
| SONTAG, SANDRA H 3700 N.W. 91ST ST., A-100 GAINESVILLE, FL 32606 | |

| | |
|--|-------------|
| 7. Name and Address of New Registered Agent | |
| Name | |
| Street Address (P.O. Box Number is Not Acceptable) | |
| City | FL Zip Code |

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 | | 13. ADDRESS CHANGES ONLY | |
|---------------------------------|------------------------------|--------------------------|--|
| DOCUMENT # | P96000024406 | STREET ADDRESS | |
| NAME | OAK GLADE APARTMENTS, INC. | CITY - ST - ZIP | |
| STREET ADDRESS | 3700 N.W. 91ST STREET, A-100 | | |
| CITY - ST - ZIP | GAINESVILLE, FL 32606 | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY - ST - ZIP | |
| STREET ADDRESS | | | |
| CITY - ST - ZIP | | | |
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| NAME | | CITY - ST - ZIP | |
| STREET ADDRESS | | | |
| CITY - ST - ZIP | | | |

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05/15/06--01048--012 **500.00

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: *Oscar Havfler* **Oscar Havfler** 4-10-06 352-376-3336
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE