2006 LIMITED PARTNERSHIP ANNUAL REPORT

		Due by September 6, 2006		- 11 t		
	DOCLIN	MENT # A97000002559	THE	SECRETARY OF STATE DIVISION OF CURPORATIONS		
.:	1. Emity Name	1. Edity Name 263 HUNT PARK COVE, LTD.		UIVISION OF CHE	r SIAIE	
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	Principle Place of Susiness Mailing Address					
	263 HUNG ARK COVE 1671 GLEN ETHEL LANE LONGWOOD, FL 32779 LONGWOOD, FL 32779					
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				07052006 No Chg-LP CF	R2E003 (11/05)	
	D	DO NOT WRITE IN THIS SPACE		4. FEI Number	Applied Fee	
				59-3480297	Applied For Not Applicable	
					¢9.75	
				5. Certificate of Status Desired	Fee Required	
	6. Name and Address of Current Registered Agent		•			
	PRICE PAMELA O		1			
	PRICE, PAMELA O 301 EAST PINE STREET, SUITE 1400 ORLANDO, FL 32801		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 Signature, typed or printed name of registered agent and title if applicable.					
					AIE	
	FILE NOWIII FEE IS \$900.00 On or after September 6, 2006, Fee will be \$1000.00					
		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			· · · · · · · · · · · · · · · · · · ·	
		P97000096259				
	l	BURMAN ASSOCIATES, INC.				
	l	1671 GLEN ETHEL LANE LONGWOOD, FL 32779				
	DOCUMENT /	EONGWOOD, PE 32119				
	NAME			70007777 01046	CHUUT CHUUT	
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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					
İ		GRATURE SUSANK DULMAN 7-05-06				
	SIGNATU		1 03	76		
<u></u> l	· · · · · · · · · · · · · · · · · · ·	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNE	R	Date	Daytime Phone #	