2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 21, 2006 08:00 AM
Secretary of State

DOCUMENT # A98000000474

1. Entity Name
KAY LARKIN, LTD.

Principal Place of Business	Mailing Address
65 LEWIS BOULEVARD ST. AUGUSTINE, FL 32084	65 LEWIS BOULEVARD ST. AUGUSTINE, FL 32084

04122006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3536234
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FLORIDA
390 N. ORANGE AVENUE, SUITE 1100
ORLANDO, FL 32801

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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

DOCUMENT #	P99000003247
NAME	CAMPBELL HOUSING ENTERPRISES, INC.
STREET ADDRESS	65 LEWIS BOULEVARD
CITY-ST-ZIP	ST. AUGUSTINE, FL 32084
DOCUMENT #	K07812
NAME	RIVERSIDE BUILDERS OF PUTNAM COUNTY, INC.
STREET ADDRESS	RT. 6, BOX 884
CITY-ST-ZIP	PALATKA, FL 32177
DOCUMENT #	N94000005306
NAME	PROJECT TEAMWORK, INC.
STREET ADDRESS	14540 S.W. 136TH STREET, SUITE 202
CITY-ST-ZIP	MIAMI, FL 33186
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Roy Campbell 4-17-06 (904) 377-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #