

# **2006 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A98000000850

**FILED**  
**Mar 02, 2006**  
**Secretary of State**

**Entity Name:** SIMON COUSINS LIMITED PARTNERSHIP

**Current Principal Place of Business:**

1408 NORTH WESTSHORE BLVD., SUITE 150  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

C/O STEPHEN KUSSNER, ESQ.  
201 NORTH FRANKLIN STREET, #2200  
TAMPA, FL 33602

**New Mailing Address:**

**FEI Number:** 59-3502681

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KUSSNER, STEPHEN  
C/O GRAY, HARRIS, ET AL  
201 N. FRANKLIN STREET, SUITE 2200  
TAMPA, FL 33602 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: P98000030994  
Name: FUN UNCLE, INC.  
Address: 201 N. FRANKLIN STREET, #2200  
City-St-Zip: TAMPA, FL 33602

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DAVID H SIMON

PRES

03/02/2006

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date