


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

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

DOCUMENT # A98000001276
1. Entity Name
GABLES ON THE GREEN LIMITED GROUP



Principal Place of Business 550 BILTMORE WAY SUITE 740 CORAL GABLES, FL 33134	Mailing Address 550 BILTMORE WAY SUITE 740 CORAL GABLES, FL 33134
--	--

DO NOT WRITE IN THIS SPACE



04122006 No Chg-LP CR2E003 (11/05)

4. FLI Number 65-0843157	Applied For Not Applicable
------------------------------------	-------------------------------

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

6. Name and Address of Current Registered Agent
**KING, RUSSELL L ESQ.
C/O CAMNER, LIPSITZ AND POLLER, P.A.
550 BILTMORE WAY, #700
CORAL GABLES, FL 33134**

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 _____ 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 #	P96000079760
NAME	GABLES ON THE GREEN HOLDINGS, INC.
STREET ADDRESS	550 BILTMORE WAY
CITY-STATE-ZIP	CORAL GABLES, FL 33134
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

U00000524620
05/03/06-80121-003 500.00

DO NOT WRITE IN THIS SPACE

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:  **OSCAR ROGER** 4/12/06 305-448-4091
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #