2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

Jan 12, 2006 08:00 AM DOCUMENT # A98000001621 **Secretary of State** 1. Entity Name DAWSON RAY, LTD. Mailing Address Principal Place of Business **3601 CARLTON PLACE** 3601 CARLTON PLACE BOCA RATON, FL 33496 BOCA RATON, FL 33496 01052006 No Cha-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0866385 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE DAWSON RAY, INC. 3601 CARLTON PLACE BOCA RATON, FL 33496 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. 11000000384533 FILE NOW!!! FEE 18 \$500.00 After May 1, 2006, Fee will be \$900.00 |01/17/06-80017-020 500**.0**0 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. GENERAL PARTNER INFORMATION 12. DOCUMENT # P98000058767 DAWSON RAY, INC. NAME 3601 CARLTON PLACE STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33498 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADORESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME

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AMY S. SCHUDSSER, BIKES I DENT

14. I hereby certify that the information supplied with this filling 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 required by Chapter 629, Florida Statutes

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STREET ADDRESS CITY-ST-ZIP

SIGNATURE: 5