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

## DOCUMENT # A98000001717

1. Entity Name

THE LONGWILL LIMITED PARTNERSHIP



FILED

SECRETARY OF STATE

DIVISION OF CORPORATIONS

06 MAR 10 AM 9: 08

Principal Place of Business 6620 S.W. 92ND STREET

MIAMI, FL 33156

Mailing Address

6620 S.W. 92ND STREET MIAMI, FL 33156



## DO NOT WRITE IN THIS SPACE

01092006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 65-0902294

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LONGWILL, DEBORAH 7765 S.W. 87 AVE., SUITE 212 MIAMI, FL 33173

## DO NOT WRITE IN THIS SPACE

<ol><li>The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, the obligations of registered agent.</li></ol>	In the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and tritle if applicable.	DATE

FILE NOWIII 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.

GENERAL PARTNER INFORMATION 12. DOCUMENT # G03051900226 LONGWILL-FOX CHILDREN'S TRUST STREET ADDRESS 6620 S.W. 92ND STREET CITY-ST-ZIP MIAMI, FL 33156 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP

700068540317 03/23/06--01049--021 \*\*500.00

DO NOT WRITE
IN THIS SPACE

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:

DOCUMENT /
NAME
STREET ADDRESS
CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT A
NAME
STREET AA 195SS

SIGNATURE AND TYPED OBJECTION THE SIGNATURE AND TYPED OBJECTION THE SIGNATURE OF SIGNING GENERAL PARTNER

2/1/0

305 279 7546