

2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A98000001975

FILED
Apr 25, 2006
Secretary of State

Entity Name: EVELYN ALMAND FAMILY LIMITED PARTNERSHIP

Current Principal Place of Business:

201 N. FRANKLIN STREET
SUITE 2000
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1531
TAMPA, FL 33601

New Mailing Address:

FEI Number: 59-3532986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOODWIN, JAMES W
201 N. FRANKLIN STREET
SUITE 2000
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 #:

Name: ALMAND, JOHN SCOTT TRUSTEE
Address: 201 N. FRANKIN STREET, SUITE 2000
City-St-Zip: TAMPA, FL 33602

Document #:

Name: ALMAND LIGORI, EVE LYNN
Address: 201 N. FRANKLIN STREET, SUITE 2000
City-St-Zip: TAMPA, FL 33602

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

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: JOHN SCOTT ALMAND

GP

04/25/2006

Electronic Signature of Signing General Partner

Date