


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 APR 24 AM 10:19

DOCUMENT # A98000002072					
1. Entity Name KENT FAMILY LIMITED PARTNERSHIP					
Principal Place of Business 2905 JACQUE LEE LANE LAKELAND, FL 33803			Mailing Address 2905 JACQUE LEE LANE LAKELAND, FL 33803		
2. Principal Place of Business 620 LAUREL LANE		3. Mailing Address 620 LAUREL LANE			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04072006 Chg-LP CR2E003 (11/05)	
City & State		City & State		4. FEI Number 59-3536423	
Zip 33813		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 33813		Country		Applied For Not Applicable	
6. Name and Address of Current Registered Agent KENT, JERARD A 2905 JACQUE LEE LANE LAKELAND, FL 33803			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable) 620 LAUREL LANE			Street Address (P.O. Box Number is Not Acceptable) 620 LAUREL LANE		
City			City		
FL			Zip Code 33813		
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 <i>Jerard A. Kent</i> DATE <u>4/13/06</u>					
<p align="center">FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00</p> <p align="center">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.</p>					
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT #	P98000077008	STREET ADDRESS	620 LAUREL LANE		
NAME	KENT FAMILY ENTERPRISES, INC.	CITY - ST - ZIP	33813		
STREET ADDRESS	2905 JACQUE LEE LANE	STREET ADDRESS	500074177985		
CITY - ST - ZIP	LAKELAND, FL 33803	CITY - ST - ZIP	05/08/06 01011 014 **500.00		
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CITY - ST - ZIP		CITY - ST - ZIP			
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: <i>Jerard A. Kent</i> DATE <u>4/13/06</u> TELEPHONE # <u>863-646-1118</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER					

SAMPLE CHECK HERE