

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A98000002570	
1. Entity Name THE BAUMAN FAMILY LIMITED PARTNERSHIP	



FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 MAR 27 AM 9:51

Principal Place of Business 5021 OAK HILL LANE #126 DELRAY BEACH, FL 33484	Mailing Address P.O. BOX 1003 WENDELL, MA 01379
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2. Principal Place of Business 1208 S. Military Trail #109 Suite, Apt. #, etc. Deerfield Beach City & State FL Zip 33442 US	3. Mailing Address Suite, Apt. #, etc. City & State Country
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03072006 Chg-LP CR2E003 (11/05)

4. FEI Number 52-2002130	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BAUMAN, LUCIAN HORIZON CLUB 1208 S MILITARY TRAIL #1109 DEERFIELD BEACH, FL 33442	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 S. B. DATE

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	BAUMAN, JEFFREY	STREET ADDRESS	
NAME	52 LOCKE HILL ROAD	CITY - ST - ZIP	
STREET ADDRESS	WENDALL, MA 01379		
CITY - ST - ZIP			
DOCUMENT #		STREET ADDRESS	800069949198
NAME		CITY - ST - ZIP	04/10/06--01052--005 **508.75
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STREET ADDRESS			
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: S. B. 03/6/06 978-544-7696

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE