2006 LIMITED PARTNERSHIP ANNUAL REPORT

FILED Mar 29, 2006 08:00 AM

Due By May 1; 2006				Secretary of State		
DOCU 1. Entity Nam	MENT # A980000	002797		Secre	tary of State	
	ICO LIMITED PARTNEI	RSHIP				
Principal Place of Business 6235 SE CHARLESTON PLACE, G103 HOBE SOUND, FL 33455 Mailing Address 6235 SE CHARLESTON PLACE, HOBE SOUND, FL 33455 HOBE SOUND, FL 33455			CE, G103			
DO NOT WRITE IN THIS SPACE				03202008 No Chg-LP	CR2E003 (11/05)	
DO NOT WITH IN THIS STA				4. FEI Number 65-0881323	Applied For Not Applicabl	
		-		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
SOBKO (6. Name and Address of Cu	rent Registereo Agent		DO NOT W	DITE	
SOPKO, JAMES 2307 S.E. MONTEREY ROAD STUART, FL 34994				DO NOT WRITE IN THIS SPACE		
the obligat	tions of registered agent.	ant for the purpose of changing its regis	stered office or register	ed agent, or both, in the State of Flo	rida. I am familiar with, and accep	
SIGNATURE	Signature, typed or printed name of registered	NOWILL FEE IS \$500.00 1, 2008, Fee will be \$900.00			DATE	
	A GENERAL PARTN	ER THAT IS A BUSINESS ENTITY MAY NOT be changed on the fo	MUST BE REGIST	TERED AND ACTIVE WITH TH	IS OFFICE.	
12.		TNER INFORMATION				
DOCUMENT # NAME STREET ADDRESS	P98000101802 CATAWBA, INC. 6235 SE CHARLESTON PL	4CE, G103		U000 04/11/0	00483218 6-80109 -0 07 50 0.0	
C)TY - ST - ZIP DOCUMENT #	HOBE SOUND, FL 33455					
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14. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further ceruly that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as it 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 CHY-ST-ZIP