

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

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 06 APR 24 AM 11:15

**DOCUMENT # A99000001398**

1. Entity Name  
 SCHUTZENDORF LIMITED PARTNERSHIP, L.L.P.



Principal Place of Business  
 19029 U.S. HWY. 19 NORTH  
 BUILDING 8, UNIT 9  
 CLEARWATER, FL 33764

Mailing Address  
 436 POINSETTIA AVENUE  
 CLEARWATER, FL 33767

2. Principal Place of Business

3. Mailing Address  
 3543 Lake Highland Drive



Suite, Apt. #, etc.

Suite, Apt. #, etc.

03092006 Chg-LP CR2E003 (11/05)

City & State

City & State  
 PALM HARBOR FL

4. FEI Number  
 59-3597048

Applied For  
 Not Applicable

Zip

Country

Zip  
 34683

Country  
 USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GASSMAN, ALAN S  
 1245 COURT STREET, SUITE 102  
 CLEARWATER, FL 33756

Name  
 Gregory H. Schutzendorf  
 Street Address (P.O. Box Number is Not Acceptable)  
 3543 Lake Highland Drive  
 City  
 PALM HARBOR FL Zip Code  
 34683

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 Gregory H. Schutzendorf  
 Signature, typed or printed name of registered agent and title if applicable.

Gregory H. Schutzendorf 4-15-06  
 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 #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 SCHUTZENDORF, GILBERT H TRUSTEE  
 19029 U.S. HWY. 19 NORTH, BLDG 8, UNIT 9  
 CLEARWATER, FL 33764

STREET ADDRESS  
 CITY-ST-ZIP

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 SCHUTZENDORF, ALICE MAY C TRUSTEE  
 19029 U.S. HWY. 19 NORTH, BLDG 8, UNIT 9  
 CLEARWATER, FL 33764

STREET ADDRESS  
 CITY-ST-ZIP

600074080516  
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STAPLE CHECK HERE

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: Alice M. Schutzendorf  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/13/06  
 Date Daytime Phone #