

**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006**

FILED
Feb 09, 2006 08:00 AM
Secretary of State

DOCUMENT # A99000001469	
1. Entity Name SCHWARTZ FAMILY REALTY, LTD.	

Principal Place of Business 11714 BRIARWOOD CIRCLE BOYNTON BEACH FL 33437	Mailing Address 11714 BRIARWOOD CIRCLE BOYNTON BEACH FL 33437
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

1st MOORE CR2E003 (10/05)

4. FEI Number **65-0948530** Applied For ☐ Not Applicable ☐

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

6. Name and Address of Current Registered Agent SCHWARTZ, IRVING 11714 BRIARWOOD CIRCLE BOYNTON BEACH FL 33437	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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! Fee is \$500. * After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.**

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 #		STREET ADDRESS	U00000428289
NAME	SCHWARTZ, IRVING H	CITY-ST-ZIP	02/21/06-80040-007 500.00
STREET ADDRESS	11714 BRIARWOOD CIRCLE		
CITY-ST-ZIP	BOYNTON BEACH FL 33437		
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STREET ADDRESS			
CITY-ST-ZIP			

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: *Irving H. Schwartz* IRVING H. SCHWARTZ v-7-2006 561-731-4901