

**2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006**

DOCUMENT # A99000001822

1. Entity Name
CENTENNIAL PARTNERS, LTD.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JUL 18 AM 10:31

Principal Place of Business
1730 E COMMERCIAL BLVD.
FT. LAUDERDALE, FL 33334

Mailing Address
1730 E COMMERCIAL BLVD.
FT. LAUDERDALE, FL 33334

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
2101 W. Commercial Blvd.
Suite, Apt. #, etc.
Suite 2800
City & State
Fort Lauderdale, FL
Zip
Country
USA

07132006 Chg-LP CR2E003 (11/05)

4. FEI Number
65-0960428

Applied For
Not Applicable

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

Handwritten initials



6. Name and Address of Current Registered Agent

FORMAN, ROBERT S ESQ.
2101 WEST COMMERCIAL BLVD.
SUITE 2800
FORT LAUDERDALE, FL 33309

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 \$500.00
Due by September 6, 2006**

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**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	P99000096877 CENTENNIAL ATLANTA, INC. 6278 N. FEDERAL HIGHWAY, #302 FT. LAUDERDALE, FL 33308	STREET ADDRESS CITY-ST-ZIP	2101 West Commercial Blvd., Suite 2800 Fort Lauderdale, FL 33309
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP	200077779212 07/20/06--01046--012 **500.00
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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 Statute

SIGNATURE: *Kenneth L. ...*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER _____ Date _____ Daytime Phone # _____