


2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

DOCUMENT # A99000001822 1. Entity Name CENTENNIAL PARTNERS, LTD.	
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Principal Place of Business 1730 E COMMERCIAL BLVD. FT. LAUDERDALE, FL 33334	Mailing Address 2101 W COMMERCIAL BLVD SUITE 2800 FORT LAUDERDALE, FL 33309
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2. Principal Place of Business - No P.O. Box # 3700 Airport Road	3. Mailing Address Suite, Apt. #, etc. Suite 401
City & State Boca Raton, FL	City & State City State
Zip 33431	Country USA

FILED

2007 MAR 15 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01092007 Chg-LP CR2E003 (12/06)

4. FEI Number 65-0960428	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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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 State 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE _____
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FILE NOW!!! FEE IS \$500.00
After May 1, 2007, 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 # P990000096877 NAME CENTENNIAL ATLANTA, INC. STREET ADDRESS 2101 W COMMERCIAL BLVD SUITE 2800 CITY-ST-ZIP FT. LAUDERDALE, FL 33309	STREET ADDRESS CITY-ST-ZIP
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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 Statutes

SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small> Kenneth L. Shimm, President	3/7/07 561-391-1751 <small>Date Daytime Phone #</small>
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