

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 22, 2006 08:00 AM
Secretary of State

DOCUMENT # A99000002019

1. Entity Name
POLIVY ENTERPRISES LIMITED PARTNERSHIP



Principal Place of Business
10908 BOCA WOODS LANE
BOCA RATON, FL 33428

Mailing Address
10908 BOCA WOODS LANE
BOCA RATON, FL 33428



02272006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0965530

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

POLIVY, BERNICE
10908 BOCA WOODS LANE
BOCA RATON, FL 33428

**DO NOT WRITE
IN THIS SPACE**

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 _____

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

DATE _____

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

000000478650
04/06/06-80017-012 500.00

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

DOCUMENT #
NAME POLIVY, BERNICE
STREET ADDRESS 10908 BOCA WOODS LANE
CITY-ST-ZIP BOCA RATON, FL 33428

DOCUMENT #
NAME P99000100341
STREET ADDRESS POLIVY ENTERPRISES, INC.
10908 BOCA WOODS LANE
CITY-ST-ZIP BOCA RATON, FL 33428

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CITY-ST-ZIP

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IN THIS SPACE**

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: *Bernice Polivy*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date *3/19/06*

Daytime Phone # *561-479-0849*

STAPLE CHECK HERE