


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 MAR 17 AM 10:46

DOCUMENT # A99000002266	
1. Entity Name WORONOFF LIMITED PARTNERSHIP	

Principal Place of Business 105 WATERWAY LANE VERO BEACH, FL 32963	Mailing Address 105 WATERWAY LANE VERO BEACH, FL 32963
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2. Principal Place of Business 200 Indian Harbor Drive Suite, Apt. #, etc.	3. Mailing Address 505 Beachland Blvd, Box 158 Suite, Apt. #, etc. Pak Mail Beachside
City & State Vero Beach, FL	City & State Vero Beach FL
Zip 32963	Country



01232006 Chg-LP CR2E003 (11/05)

4. FEI Number 65-0970279	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 VALDES-FAULI CORPORATE SERVICES, INC. 777 SOUTH FLAGLER DRIVE, SUITE 500 EAST WEST PALM BEACH, FL 33401	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 \$500.00
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	P99000111868 WORONOFF MANAGEMENT, INC. 105 WATERWAY LANE VERO BEACH, FL 32963	STREET ADDRESS CITY-ST-ZIP	200 Indian Harbor Drive Vero Beach, FL 32963
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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: Petunia Woronoff March 2, 2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE