## 2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

## **FILED** May 01, 2006 08:00 Al e

		Due by ma	0				
	DOCUMENT # B0000000096  1. Entity Name PYRAMID PARTNERS LP, LTD.					Secre	tary of State
	Principal Place of Business 777 SOUTH FLAGLER DRIVE, SUITE 1101 E C/O GOODMAN COMPANY WEST PALM BEACH, FL 33401		Mailing Address 777 SOUTH FLAGLER DRIVE, SUITE 1101 E C/O GOODMAN COMPANY WEST PALM BEACH, FL 33401		APPLICATION OF THE PROPERTY OF		
					04202006 No Ch		
	DO NOT WRITE I		N THIS SPACE		4. FEI Number NOT APPLIC		Applied For Not Applicable \$8.75 Additional
	e jarri jarri samenini mini garananani mini garananani	6. Name and Address of Current R			5. Certificate of State	ıs Desired 📈	Fee Required
	SHEWALTER, WILLIAM A 777 SOUTH FLAGLER DRIVE, SUITE 1101 E C/O GOODMAN COMPANY WEST PALM BEACH, FL 33401				DO NO	ATTRICK STATE OF THE SAME OF THE	Carried Strategies of the Comment of
CHECK HERE	8. The above named entity submits this statement for the purpose of changing its registered office or registered age the obligations of registered agent. SIGNATURE — Signature, typed or printed name of registered agent and talls if applicable.				ed agent, or both, in th		am familiar with, and accept
	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 REGIST NOTE: General Partners MAY NOT be changed on the form; an amendment				ERED AND ACTIVI t must be filed to c	E WITH THIS OF hange a genera	FICE. I partner.
	12.	GENERAL PARTNER	NFORMATION	ne internet i in	* 4.734		
	NAME STREET ADDRESS	M00000000619 PYRAMID GP LLC 777 SOUTH FLAGLER DRIVE, SU	ITE 1101 E	and the second of the second o		1000000554	190
	OBCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	WEST PALM BEACH, FL 33401					82-011-508.75 
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				DO NO	T WRIT	E E
	DOCUMENT # KAME STREET ADDRESS CITY-ST-ZIP				IN THIS	SPAC	
	DOCUMENT # NAME STREET ADDRESS						
STAPLE	CITY-ST-ZIP  DOCUMENT #  NAME				Andrews (Constitution of the Constitution of t		

14. I hereby certify that the information supplied with this filling 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

Pyramid of LLC, general partner, by: Goodman Properties Inc., its manager

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

April 27, 2006

561-833-3777

Daylime Phone #