


**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006**

FILED
Apr 06, 2006 08:00 AM
Secretary of State

DOCUMENT # B01000000291

1. Entity Name
CHESTERFIELD PARK ASSOCIATES LIMITED PARTNERSHIP



Principal Place of Business Mailing Address
**9051 FLORIDA MINING BLVD., STE. 100
TAMPA FL 33634** **9051 FLORIDA MINING BLVD., STE. 100
TAMPA FL 33634**



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-2695875** Applied For
Not Applied

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

1st MOORE CR2E003 (10/05)

6. Name and Address of Current Registered Agent
**CRACCHIOLO, SAM A JR.
2855 SOUTH CONGRESS AVENUE, SUITE A
DELRAY BEACH FL 33445**

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 **04/20/06-80071-020 500.00**

FILE NOW!!! Fee is \$500. * After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.**

**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 #	F97000005546	STREET ADDRESS	
NAME	CHESTERFIELD PARK CORPORATION	CITY-ST-ZIP	
STREET ADDRESS	2855 S. CONGRESS AVENUE, SUITE A		
CITY-ST-ZIP	DELRAY BEACH FL 33445		
DOCUMENT #		STREET ADDRESS	
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CITY-ST-ZIP			

STAPLE CHECK HERE

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:  PRESIDENT 3/16/06 813-889-835