2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

CITY-ST-ZIP

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

	DOCUMENT # B0400000361 1. Entity Name THE GESS FAMILY PARTNERSHIP, LTD.					06 APR -7	AM :		
}	Principal Place of Business 12670 NEW BRITTANY BLVD., SUITE 101 FORL MYERS, FL 33907 Mailing Address 12670 NEW BRITTANY BLV FORL MYERS, FL 33907			BLVD., SUITE 10 07		III 8806 8180 8810 8810	11/4 11/4 18/1/ 18/1/	8 11118 8 1181 1185 FH 81 1881	
	2. Principal Pla	ace of Business CorkscrewRd.							
		Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State			01192006 Chg-LP CR2E003 (11/05)				
	City & State				4. FEI Num 61-13	nber 25676		Applied For Not Applicable	
	33920 Country USA		Zip 	Country	5. Certificate of Status Desire		Fee Required		
F	6. Name and Address of Current Registered Agent			Name	7. Name a	nd Address of Nev	w Registered Ag	jent	
	COSTELLO, TRUMAN J 12670 NEW BRITTANY BLVD., SUITE 101 FORT MYERS, FL 33907				Street Address (P.O. Box Number is Not Acceptable)				
				City	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 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 ENTITION NOTE: General Partners MAY NOT be changed on the				TY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.				
Į	12. GENERAL PARTNER INFORMATION		13.	ADDRESS CHANGES ONLY					
	DOCUMENT # NAME	GESS, WILLIAM B JR.	STREET ADDRESS	229 I	229 Barrow Road				
	STREET ADDRESS CITY-ST-ZIP	750 WALNUT HILL, CHILESBURG RD. LEXINGTON, KY 40509		CITY-ST-ZIP	Lexington, KY 40502				
	DOCUMENT # NAME	GESS, ELIZABETH P		STREET ADDRESS	2290	229 Barrow Road			
_[STREET ADDRESS CITY-ST-ZIP	1.00 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		CITY-ST-ZIP	Lexing	Lexington, KY 40502			
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	STREET ADDRESS			CITY-ST-ZIP					

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