


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

**FILED  
Mar 27, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # B92000000075**  
1. Entity Name  
**DAYTONA PAR 3 PARTNERS, L.P., LTD.**



Principal Place of Business <b>275 CLYDE MORRIS BLVD. ORMOND BEACH, FL 32174</b>	Mailing Address <b>275 CLYDE MORRIS BLVD. ORMOND BEACH, FL 32174</b>
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**DO NOT WRITE IN THIS SPACE**



02082006 No Chg-LP      CR2E003 (11/05)

4. FEI Number <b>59-3152595</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  
**VOGES, WILLIAM J  
275 CLYDE MORRIS BLVD.  
ORMOND BEACH, FL 32174**

**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 \_\_\_\_\_ 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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>P00000093902 ROOT REAL ESTATE CORP. 275 CLYDE MORRIS BLVD ORMOND BEACH, FL 32174</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>M94000000022 RDT, L.L.C., L.C. 275 CLYDE MORRIS BLVD ORMOND BEACH, FL 32174</b>
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04/11/06-00048-008 500.00

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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:**  **Root Real Estate Corp.**  
**William J. Voges, Pres.**      **3/30/2006**      **386-671-4908**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER      Date      Daytona Phone #