

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # B97000000026

1. Entity Name
OHANA LIMITED PARTNERSHIP



Principal Place of Business
**2216 EAGLES LANDING WAY
KISSIMMEE, FL 34744**

Mailing Address
**2216 EAGLES LANDING WAY
KISSIMMEE, FL 34744**



DO NOT WRITE IN THIS SPACE

01222008 No Chg-LP

CR2E003 (11/05)

4. FEI Number
52-1563712

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HAYES, ROBERT S ESQ.
441 WEST VINE STREET
KISSIMMEE, FL 34741**

**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

Signature is typed or printed name of registered agent and file if applicable

DATE

**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
**PAULSON, CLIFFORD R
2216 EAGLES LANDING WAY
KISSIMMEE, FL 34744**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**PAULSON, NETTA A
2216 EAGLES LANDING WAY
KISSIMMEE, FL 34744**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**WILKINSON, LANI KAY
2216 EAGLES LANDING WAY
KISSIMMEE, FL 34744**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**OLSON, LYN DIAN
2216 EAGLES LANDING WAY
KISSIMMEE, FL 34744**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**PAULSON, LEE RAE
2216 EAGLES LANDING WAY
KISSIMMEE, FL 34744**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**PAULSON, LELE ESTHER
2216 EAGLES LANDING WAY
KISSIMMEE, FL 34744**

UN00000401849
02/02/06-S0063-009 500.00

**DO NOT WRITE
IN THIS SPACE**

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: *Netta A. Paulson* NETTA A. PAULSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

22 JANUARY 2006 240-409-6222

Date

Daytime Phone #

STAPLE CHECK HERE