

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

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

06 FEB -8 AM 10:45

**DOCUMENT # B97000000670**

1. Entity Name  
**JAN REAL ESTATE COMPANY LIMITED PARTNERSHIP**



Principal Place of Business  
 PGA BLVD. & MILITARY TRAIL  
 PALM BEACH GARDENS, FL 33418

Mailing Address  
 C/O HERBERT GOLDSTEIN CPA  
 37000 GRAND RIVER, STE. 80  
 FARMINGTON HILLS, MI 48335

2. Principal Place of Business

**SAME**

3. Mailing Address

**C/O JACQUELYN S. HESS CPA**



01242006 Chg-LP CR2E003 (11/05)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**37000 GRAND RIVER STE 280**

City & State

City & State

**FARMINGTON HILLS MI**

4. FEI Number

**38-3383502**

Applied For

Not Applicable

Zip

Country

Zip

Country

**48335**

**USA**

5. Certificate of Status Desired ☒

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**GYONGYOSI, EVA  
 TWO OCEAN LANE  
 MANALAPAN, FL 33462**

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

Signature, typed or printed name of registered agent and title 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 # **F97000006551**  
 NAME **EVGA CORPORATION**  
 STREET ADDRESS **25900 ROMANY WAY**  
 CITY-ST-ZIP **FRANKLIN, MI 48025**

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

DOCUMENT #  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

**700065866907**  
**02/15/06--01006--012 \*\*508.75**

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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

SIGNATURE:

*Eva Gyongyosi* **EVA GYONGYOSI**

Date

**1/30/06 561-626-6163**

Daytime Phone #

STAPLE CHECK HERE