

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 20, 2006 08:00 A
Secretary of State

DOCUMENT # B98000000183
 1. Entity Name **R.E.S. PARTNERS, LP.**



Principal Place of Business **PO BOX 357064 GAINESVILLE, FL 32635-7065**
 Mailing Address **PO BOX 357064 GAINESVILLE, FL 32635-7065**

DO NOT WRITE IN THIS SPACE



01152006 No Chg-LP CR2E003 (11/05)
 4. FEI Number **22-3570566** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
HAINES, TIM D
125 NE FIRST AVENUE, SUITE 1
OCALA, FL 34470

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 _____

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 #	B98000000182
NAME	R.E.S. GENERAL, L.P.
STREET ADDRESS	10912 NW 14TH AVE.
CITY-ST-ZIP	GAINESVILLE, FL 32606
DOCUMENT #	
NAME	
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 04/05/06-80032-001-500.00

DO NOT WRITE IN THIS SPACE

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: *[Signature]* **ETHEMER 3/16/06** **952562949**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date City/State/Phone #