

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAY -3 PM 2:54

DOCUMENT # A27728

1. Entity Name
MALL OF THE AVENUES LIMITED PARTNERSHIP



Principal Place of Business
**2030 HAMILTON PLACE BLVD., STE. 500
CHATTANOOGA, TN 37421-6000**

Mailing Address
**2030 HAMILTON PLACE BLVD., STE. 500
CHATTANOOGA, TN 37421-6000**



04062006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
62-1368735

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**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, 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 # **A30264**
NAME **CBL/AVENUES G.P., LIMITED**
STREET ADDRESS **2030 HAMILTON PLACE BLVD., STE. 500**
CITY-STATE-ZIP **CHATTANOOGA, TN 374216000**

DOCUMENT # **P92000003222**
NAME **DP AVENUES II, INC.**
STREET ADDRESS **7620 MARKET STREET**
CITY-STATE-ZIP **YOUNGSTOWN, OH 44513**

DOCUMENT #
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IN THIS SPACE**

500074621585
05/15/06--01035--025 **500.00

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: *Christopher A. Price* **Christopher A. Price, Tax Mgr., Asst. Sec.** **4/7/06** **423/855-0001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE