

# **2006 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A94000001529

**FILED**  
**Jan 25, 2006**  
**Secretary of State**

**Entity Name:** FRANCES M. PRUITT LIMITED PARTNERSHIP I

**Current Principal Place of Business:**

360 COFFEE POT RIVIERA, N.E.  
ST. PETERSBURG, FL 337043614

**New Principal Place of Business:**

259 THIRD STREET NORTH  
ST. PETERSBURG, FL 337013818

**Current Mailing Address:**

POST OFFICE BOX 30  
ST. PETERSBURG, FL 337310030

**New Mailing Address:**

**FEI Number:** 59-3262752      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WALLACE, PETER R  
259 THIRD STREET NORTH  
ST. PETERSBURG, FL 33701      US

**Name and Address of New Registered Agent:**

WALLACE, PETER R  
259 THIRD STREET NORTH  
ST. PETERSBURG, FL 337013818      US

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

01/25/2006

Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: PRUITT, FRANCES M TRUSTEE  
Address: 360 COFFEE POT RIVIERA, N.E.  
City-St-Zip: ST. PETERSBURG, FL 337043614

**ADDRESS CHANGES ONLY:**

Address: 259 THIRD STREET NORTH  
City-St-Zip: ST. PETERSBURG, FL 337013818

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: FRANCES M. PRUITT, TRUSTEE

Electronic Signature of Signing General Partner

01/25/2006

Date