2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # A98000002429

1. Entity Name
SHIELDS FAMILY R.L.L.P.

Principal Place of Business	Mailing Address
3294 SPRUCE CREEK GLEN DAYTONA BEACH, FL 32124	3294 SPRUCE CREEK GLEN DAYTONA BEACH, FL 32124

DO NOT WRITE IN THIS SPACE

02142006 No Chg-LP CR2E003 (11/05)

4. FEI Number
59-3551668
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

SHIELDS, DANNIE J SR.
3294 SPRUCE CREEK GLEN
DAYTONA BEACH, FL 32124

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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
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS $500.00
After May 1, 2006, Fee will be $900.00

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06A12706-80022-020 500.00

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	SHIELDS, TOMMY D
STREET ADDRESS	1555 BELLA VISTA DRIVE
CITY-ST-ZIP	ENCINITAS, CA 92024
DOCUMENT #	
NAME	SHIELDS, CHARLIE
STREET ADDRESS	749 BOSTON AVENUE
CITY-ST-ZIP	SOUTH DAYTONA, FL 32119
DOCUMENT #	
NAME	SHIELDS, MARY KATHRYN
STREET ADDRESS	10108 SUMMIT PARK PLACE #203
CITY-ST-ZIP	LOUISVILLE, KY 40241
DOCUMENT #	
NAME	SKRABAK, PATRICIA D
STREET ADDRESS	532 HERMES AVENUE
CITY-ST-ZIP	ENCINITAS, CA 92024
DOCUMENT #	
NAME	SHIELDS, DANNIE J SR.
STREET ADDRESS	3294 SPRUCE CREEK GLEN
CITY-ST-ZIP	DAYTONA BEACH, FL 32124
DOCUMENT #	
NAME	SHIELDS, SHELLY M
STREET ADDRESS	31 ROXBURY LANE
CITY-ST-ZIP	PALM COAST, FL 32164

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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: Dannie J. Shields Sr Feb. 14, 2006 386-767-5557
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #