


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 10, 2006 08:00 AM
Secretary of State

DOCUMENT # B04000000270

1. Entity Name
JENSEN BEACH @ ROUTE 1, LLLP LTD



Principal Place of Business 4007-F NORBECK ROAD ROCKVILLE, MD 20853	Mailing Address 4007-F NORBECK ROAD ROCKVILLE, MD 20853
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DO NOT WRITE IN THIS SPACE



04042006 No Chg-LP CR2E003 (11/05)

4. FEI Number 51-0505901	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**THURLOW, THOMAS H JR
 17 MARTIN LUTHER KING JR. BOULEVARD
 SUITE 200
 STUART, FL 34994**

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

**FILE NOW!!! FEE IS \$600.00
 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 # NAME STREET ADDRESS CITY-ST-ZIP	DISALVATORE, JOHN A 4007-F NORBECK ROAD ROCKVILLE, MD 20853
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	STEWART, JAN L 3413 OLANWOOD CT., #203 OLNEY, MD 20832
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
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 04/25/06-80037-012 500.00

**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: _____ **4/4/06** **301-929-3000**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #