
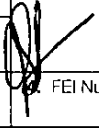


**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY SEPTEMBER 6, 2006**

| | | |
|---|--|---|
| DOCUMENT # A00000001797 | |  |
| 1. Entity Name ADKINS HOLDINGS, LTD. | | |
| Principal Place of Business 720 ELM TREE LANE BOCA RATON FL 33486 | | Mailing Address 720 ELM TREE LANE BOCA RATON FL 33486 |

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 AUG 29 AM 9:07



| | | | | |
|--|---------|---------------------|---------|--|
| 2. Principal Place of Business | | 3. Mailing Address | |  2nd MOORE CR2E003 (4/06) FEI Number 65-1032540 Applied For Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | |
| City & State | | City & State | | |
| Zip | Country | Zip | Country | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | | | |

| | | | |
|---|--|---|--|
| 6. Name and Address of Current Registered Agent ADKINS, MARTHA 790 ANDREWS AVE., APT. 106C DELRAY BEACH FL 33483 | | 7. Name and Address of New Registered Agent Name <u>JEFFREY A ADKINS</u> Street Address (P.O. Box Number is Not Acceptable) <u>720 ELM TREE LANE</u> City <u>Boca Raton</u> FL Zip Code <u>33486</u> | |
|---|--|---|--|

| | | |
|---|------|---|
| 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. | | S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the limited partnership certifies it did not receive prior notice. Fee to file is \$500.00. <input type="checkbox"/> |
| SIGNATURE <u>[Signature]</u> <small>Signature typed or printed name of registered agent and title if applicable.</small> | DATE | |
| File Now!!! Fee is \$900.00 · Due By September 6, 2006 | | |

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 | | 13. ADDRESS CHANGES ONLY | |
|---------------------------------|---------------------|--------------------------|--|
| DOCUMENT # | L00000008293 | STREET ADDRESS | |
| NAME | M & J ADKINS, LLC | CITY-ST-ZIP | |
| STREET ADDRESS | 720 ELM TREE LANE | | |
| CITY-ST-ZIP | BOCA RATON FL 33486 | | |
| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |
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| DOCUMENT # | | STREET ADDRESS | |
| NAME | | CITY-ST-ZIP | |
| STREET ADDRESS | | | |
| CITY-ST-ZIP | | | |

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09/12/06--01071--014 **900.00

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: Martina Adkins 8/25/06 561 395 0388
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE