

2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A00000002061

FILED
Jan 21, 2006
Secretary of State

Entity Name: JAMIE & JESSICA INSURANCE LIMITED PARTNERSHIP

Current Principal Place of Business:

164 BAYMOUNT DRIVE
STATESVILLE, NC 28625

New Principal Place of Business:

Current Mailing Address:

164 BAYMOUNT DRIVE
STATESVILLE, NC 28625

New Mailing Address:

FEI Number: 56-2226681

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, GARY
8001 HARWOOD C
DEERFIELD BEACH, FL 33442 US

Name and Address of New Registered Agent:

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

Date

GENERAL PARTNER INFORMATION:

Document #: B00000000399
Name: ROBINSONS OF STATESVILLE LTD
Address: 164 BAYMOUNT DRIVE
City-St-Zip: STATESVILLE, NC

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

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: GARY ROBINSON

Electronic Signature of Signing General Partner

01/21/2006

Date