2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2006

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DUE BY MAY 1, 2006					
DOCU 1. Entity Nan THE BUS	MENT # A0100000060 BEE LIMITED PARTNERSHIF THE OF BUSINESS NZA DRIVE A FL 3256V ON PROPERTY OF THE PROPERTY	06 P. Suite 103		SECRETARY OF STATE DIVISION OF CORPORATIONS 06 MAR 17 AM 10: 47	
Principal Place of Business 136 SIGUENZA DRIVE PENSACOLA FL 32561 Mailing Address 136 SIGUENZA DRIVE PENSACOLA FL 32561 Suite 103					
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ponoau					
2. Principal Place of Business		3. Mailing Address		00/	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE CR2E003 (10/05)	
City & State		City & State		FEI Number 59-3729252 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent	
Di io	יחרת ואגום				
BUSBEE, JAN B 136 SIGUENZA DRIVE COME South AST- 103 PENSACOLA FL 32561 32501			Street Address	Street Address (P.O. Box Number is Not Acceptable)	
			City FL Zip Code		
FL T					
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 TAN B. BUSBEE Sun & Auskee 3/06/06					
Signature, typed or printed name of registered agent and like applicable.					
FILE NOW!!! Fee is \$500. *** After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.					
	A GENERAL PARTNER T NOTE: General Partners MA	HAT IS A BUSINESS ENT Y NOT be changed on the	ITY MUST BE REGIS form; an amendme	STERED AND ACTIVE WITH THIS OFFICE. ent must be filed to change a general partner.	
12. GENERAL PARTNER INFORMATION			13. ADDRESS CHANGES ONLY		
DOCUMENT # NAME	BUSBEE ENTERPRISES, INC. ADDRESS 136 SIGUENZA DRIVE		STREET ADDRESS		
STREET ADDRESS			CITY-ST-ZIP		
CITY-ST-ZIP	PENSACOLA FL 32561	- Vh		900063123703	
NAME			STREET ADDRESS	03/31/0601027002 **500.00	
STREET ADORESS CITY-ST-ZIP			CITY-ST-ZIP		
DOCUMENT #					
NAME	,		STREET ADDRESS		
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NAME STREET ADDRESS			STREET ADDRESS		
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CITY-S1-ZIP			CITY-ST-ZIP	,	
DOCUMENT #			STREET ADDRESS		
NAME Street address					
CITY-ST-ZIP			CITY-ST-ZIP	,	
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 try see empowered to execute this report as required by Chapter 620, Florida Statutes					

SIGNATURE: Jan B. Busker (JAN B BUSBEF) 3/66/66 850 324 50/3