


**2006 LIMITED PARTNERSHIP ANNUAL REPORT  
Due By May 1, 2006**

**FILED  
May 02, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # A01318**  
1. Entity Name  
**FRANKLIN ARMS EAST, LIMITED**



Principal Place of Business <b>4000 B ST. JOHNS AVE. STE 22 JACKSONVILLE, FL 32205</b>	Mailing Address <b>4000 B ST. JOHNS AVE. STE 22 JACKSONVILLE, FL 32205</b>
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**DO NOT WRITE IN THIS SPACE**



04282006 No Chg-LP CR2E003 (11/05)

4. FEI Number <b>59-1347933</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**CRAVEY, JERRY R.  
4000 B ST. JOHNS AVE.  
STE 22  
JACKSONVILLE, FL 32205**

**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 \$500.00  
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	<b>WALTON, WILLIAM H., JR. 3811 MCGIRTS BLVD. JACKSONVILLE, FL</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>WEED, J.D., JR. 4334 MCGIRTS BLVD. JACKSONVILLE, FL</b>
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>370096 FRANKLIN ARMS, INC. P. O. BOX 1588 N/A JACKSONVILLE, FL</b>
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05/18/06-80002-012 500.00

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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: W. H. Walton, Jr. 4/28/06 904-388-2225  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Cayenne Phone #