


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

FILED
Sep 06, 2006 08:00 AM
Secretary of State

DOCUMENT # A02000001149			
1. Entity Name RANCHO BERNARDO CORPORATE CENTER, LTD.			
Principal Place of Business 13700 SUTTO PARK DRIVE N JACKSONVILLE FL 32224		Mailing Address 11512 EL CAMINO REAL SUITE 100 SAN DIEGO CA 92130	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



2nd MOORE CR2E003 (4/06)

4. FEI Number 95-3814547		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		7. Name and Address of New Registered Agent
F & L CORPORATION ONE INDEPENDENT DRIVE SUITE 1300 JACKSONVILLE FL 32202		Name
		Street Address (P.O. Box Number is Not Acceptable)
		City
		FL Zip Code
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>		
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 #	F96000004543	STREET ADDRESS	
NAME	DOUGLAS ALLRED COMPANY	CITY - ST - ZIP	
STREET ADDRESS	11512 EL CAMINO REAL, SUITE 100		
CITY - ST - ZIP	SAN DIEGO CA 92130		
DOCUMENT #		STREET ADDRESS	U00000576268
NAME		CITY - ST - ZIP	09/06/06-80005-003 900.00
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STREET ADDRESS			
CITY - ST - ZIP			

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: *Bryson D. Patton*, Secretary of G.P. 8/25/06 858 793-0202
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #