

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 20, 2006 08:00 AM
Secretary of State

DOCUMENT # A04000000397

1. Entity Name
BRENTWOOD PARK APARTMENTS ASSOCIATES, LTD.



Principal Place of Business
**1300 BROAD ST
JACKSONVILLE, FL 32202**

Mailing Address
**1300 BROAD ST
JACKSONVILLE, FL 32202**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02142006

Chg-LP

CR2E003 (11/05)

City & State

City & State

4. FEI Number

20-0851733

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FERGUSON, RONNIE
1300 BROAD ST
JACKSONVILLE, FL 32202**

7. Name and Address of New Registered Agent

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

DATE

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

13. ADDRESS CHANGES ONLY

DOCUMENT # **P04000044513**
NAME **BRENTWOOD PARK GP, INC.**
STREET ADDRESS **1300 BROAD ST**
CITY-ST-ZIP **JACKSONVILLE, FL 32202**

STREET ADDRESS
CITY-ST-ZIP
10710001440159
03/02/06 80030-016 500.00

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STREET ADDRESS
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 trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Ronnie A. Ferguson

Date

7/14/06

Daytime Phone #

(904) 630-3878

STAPLE CHECK HERE