2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Feb 24, 2006 08:00 AM Secretary of State

DOCUMENT	#A0400000	1578
----------	-----------	------

PICKETTVILLE PARTNERS, LTD.



Principal Place of Business

2305 MILLER OAKS DR. SOUTH JACKSONVILLE, FL 32217

Mailing Address

2305 MILLER OAKS DR. SOUTH JACKSONVILLE, FL 32217



DO NOT WRITE IN THIS SPACE

01182006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 41-2153544 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

F&LCORP. ONE INDEPENDENT DRIVE, SUITE 1300

DO NOT WRITE

JACKSONVILLE, FL 32202		IN THIS SPACE	
8. The above the obligat	named entity submits this statement for the purpose of changing its registans of registered agent.	stered office or registered agent, or both, in the State of Florida. I am familiar with, and accept	
SIGNATURE	Signature, typod or printed more of registered apent and title if explicable.	DATE	
	FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00		
	A GENERAL PARTNER THAT IS A BUSINESS ENTITY NOTE: General Partners MAY NOT be changed on the f	Y MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. orm; an amendment must be filed to change a general partner.	
00CUMENT # NAME STREET ADDRESS CITY-ST-ZEP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP TOCUMENT # NAME STREET ADDRESS CITY-ST-ZEP	GENERAL PARTNER INFORMATION P04000138723 PICKETTVILLE PARTNERS, INC. 2305 MILLER OAKS DR. SOUTH JACKSONVILLE, FL 32217	Hundon444891 n-2777/06-80021-008 500.00 DO NOT WRITE	
DOCUMENT # NAME STREET ADDRESS GTY-ST-ZIP		IN THIS SPACE	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP			
DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP			
nereby:	ceruly that the information supplied with this filing does not qualify for th	e 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:

STAPLE CHECK HERE

104296 800 4