## 2006 LIMITED PARTNERSHIP ANNUAL REPORT

## DOCUMENT# A04000001826

Entity Name: WEST VOLUSIA TOWNE CENTRE, LLLP

FILED Apr 04, 2006 Secretary of State

| Current Principal Place of Business:                             |                                  | New Principal Place of Business:   |   |  |
|--|----------------------------------|------------------------------------|---|--|
| 605 EAST ROBINSON S'<br>ORLANDO, FL 32801                        | TREET, SUITE 420                 |                                    |   |  |
| Current Mailing Address:   |                                  | New Mailing Address:               |   |  |
| 605 EAST ROBINSON S'<br>ORLANDO, FL 32801                        | TREET, SUITE 420                 |                                    |   |  |
| FEI Number: 75-3187082   | FEI Number Applied For()         | FEI Number Not Applicable ( )      | Certificate of Status Desired ( )         |  |
| Name and Address of Current Registered Agent:                    |                                  | Name and Address of                | Name and Address of New Registered Agent: |  |
| BROCK, M.W. JEFFREY<br>605 EAST ROBINSON S'<br>ORLANDO, FL 32801 | TREET, SUITE 420                 |                                    |   |  |
| The above named entity s in the State of Florida.                | submits this statement for the p | ourpose of changing its registered | office or registered agent, or both       |  |
| SIGNATURE:   |                                  |                                    |   |  |
| Electron   | ic Signature of Registered Ago   | ent                                | Date                                      |  |
| GENERAL PARTNER INFORM   | IATION:                          | ADDRESS CHANGES ONL                | <b>Y</b> :                                |  |
| Document #: P04000128846   |                                  |                                    |   |  |

Name: FLORIDA CENTRES, INC.

605 EAST ROBINSON STREET, SUITE 420 Address:

Address: City-St-Zip: ORLANDO, FL 32801 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: M.W. JEFFREY BROCK RΑ 04/04/2006