

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

**FILED**

2006 APR 25 AM 7:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # A04000001879</b>	
1. Entity Name <b>TENNESSEE SQUARE PARTNERS, LTD.</b>	



Principal Place of Business <b>1018 THOMASVILLE ROAD, SUITE 200-A TALLAHASSEE, FL 32303</b>	Mailing Address <b>1018 THOMASVILLE ROAD, SUITE 200-A TALLAHASSEE, FL 32303</b>
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*BK*



04212006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-1957815</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  <b>MURRAY, E. EDWARD JR 1018 THOMASVILLE ROAD, SUITE 200-A TALLAHASSEE, FL 32303</b>
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**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 \_\_\_\_\_

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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	<b>L04000081479 TALCOR TENNESSEE SQUARE, LLC 1018 THOMASVILLE ROAD, SUITE 200-A TALLAHASSEE, FL 32303</b>
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**DO NOT WRITE  
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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: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

*E. Edward Murray, Jr.*

*4/24/06*

*850-224-2300*