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2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 6, 2006

1. Entity Name	IENT # A05000001 TOWN BOTTLING, LLLP	A Mag		SECRETARY OF STATE DIVISION OF CORPORATIONS 06 SEP -6 AM 10: 45					
Principal Place of 4458 OCEAN V DESTIN, FL 32	1EW DRIVE	Mailing Address 4458 OCEAN VIEW DRIVE DESTIN, FL 32541 US	1458 OCEAN VIEW DRIVE					HI GGIAF GIJIA WATAWAR AFISAL	
Principal Place of Business 3. Mailing Address			2. Box 7039		THINING THE				
Suite, Apt. #, etc. Suite, Apt. #, etc.			JUZZ	· / / / /	07202006	Chg-LP	CR2E0	03 (11/05)	
City & State		City & State Destin, FL		FL	4. FEI Number			Applied For Not Applicabl	
Zip Country		^{zip} 32540 Country		US		of Status Desired		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				Vame	7. Name and A	Address of New R	egistered /	\gent	
DOWD, JOHN R JR. 285 HIGHWAY 98 EAST SUITE A				Street Address (P.O. Box Number is Not Acceptable)					
DESTIN, FL	DESTIN, FL 32541				City FL Zip Code				
8. The above named entity submits this statement for the purpose of changing its registe					ed agent, or both	in the State of Flo			
SIGNATURE Signature, typed or printed name of registered agent and bits if applicable. FILE NOW!!! FEE IS \$500.00 Due by September 6, 2006 A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST						the limited p prior notice. CTIVE WITH TH	artnership IS OFFICI		
NOTE: General Partners MAY NOT be changed on the 12. GENERAL PARTNER INFORMATION				in amendmen	t must be filed	ADDRESS CHA			
NAME J				ODRESS .					
CITY-ST-ZIP									
NAME STREET ADDRESS CITY-ST-ZIP			STREET A		4(00079	<u></u>	114	
DOCUMENT #			STREET A	ODRESS	400079825114 09/14/0601041003 ***500.00				
NAME STREET ADDRESS CITY-ST-ZIP			City-St-	-ZIP					
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STREET ADDRESS CITY-ST-ZIP		CITY-ST-		#111F 18 16 22					
14. I hereby ce indicated or or the received	rtify that the information supplied win this report is true and accurate and ver or trustee empowered to execute	th this filing does not qualify for I that my signature shall have the his report as required by Chap	the exemele same lepter 620, F	nptions contained gal effect as if m Florida Statutes	_	_	_	rtify that the information f the limited partnership	
SIGNATU	JRE: SIGNATURE AND TYPED OF	MANUAL PRINTED NAME OF SIGNING GENERAL	PARTNER		1-	-20 - 07 Date		laytima Phone #	
(WAllace							