

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 66 SEP -6 AM 10:45

DOCUMENT # A05000001083 1. Entity Name THE JERRY WALLACE COMPANIES, LLLP					
Principal Place of Business 4458 OCEAN VIEW DRIVE DESTIN, FL 32541 US			Mailing Address 4458 OCEAN VIEW DRIVE DESTIN, FL 32541 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address P.O. Box 7039			
City & State		City & State Destin, FL			
Zip 32540	Country US	4. FEI Number 07202006 Chg-LP		CR2E003 (11/05) <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Name and Address of Current Registered Agent DOWD, JOHN R JR 285 HIGHWAY 98 EAST SUITE A DESTIN, FL 32541			
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
FILE NOW!!! FEE IS \$500.00 Due by September 6, 2006				In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.	
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 # NAME STREET ADDRESS CITY-ST-ZIP	A05000000380 JERRY L. WALLACE LIMITED PARTNERSHIP 4458 OCEAN VIEW DRIVE DESTIN, FL 32541		STREET ADDRESS CITY-ST-ZIP	100079825141 09/14/06--01041--004 **\$500.00	
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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: <i>Jerry Wallace</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			7-20-06 Date Daytime Phone #		

STAPLE CHECK HERE

Jerry Wallace
 JERRY WALLACE