

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**

**FILED  
Jan 13, 2006  
Secretary of State**

DOCUMENT# A05000001414

**Entity Name:** FLAGLER DRIVE OFFICE CENTER, LLLP

**Current Principal Place of Business:**

525 SOUTH FLAGLER DRIVE  
SUITE 200  
WEST PALM BEACH, FL 33401 US

**New Principal Place of Business:**

**Current Mailing Address:**

525 SOUTH FLAGLER DRIVE  
SUITE 200  
WEST PALM BEACH, FL 33401 US

**New Mailing Address:**

**FEI Number:** 20-3182663      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KOEPEL, JOEL P  
525 SOUTH FLAGLER DRIVE  
SUITE 200  
WEST PALM BEACH, FL 33401 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #: L05000029896  
Name: TRUMP OFFICE CENTER, LLC  
Address: 525 SOUTH FLAGLER DRIVE, SUITE 200  
City-St-Zip: WEST PALM BEACH, FL 33401 US

**ADDRESS CHANGES ONLY:**

Address:  
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: JOEL P. KOEPEL

\_\_\_\_\_  
Electronic Signature of Signing General Partner

MGRM

01/13/2006

\_\_\_\_\_  
Date