


**2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2007**

FILED

2007 MAR 15 AM 10:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # A06000001548			
1. Entity Name THE 2006 JOYCE FAMILY FLP, LTD.			
Principal Place of Business 14130 NORTH MERIDIAN ROAD TALLAHASSEE FL 32312-9753		Mailing Address 14130 NORTH MERIDIAN ROAD TALLAHASSEE FL 32312-9753	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent BREWSTER, JAMES R 547 N. MONROE STREET, SUITE 203 TALLAHASSEE FL 32301		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 _____	
<p>FILE NOW!!! Fee is \$500. *** After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State.</p> <p>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.</p>			
12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	
NAME	JOYCE, MARY D	CITY - ST - ZIP	
STREET ADDRESS	14130 NORTH MERIDIAN ROAD		
CITY - ST - ZIP	TALLAHASSEE FL 32312-9753		
DOCUMENT #	NAME	STREET ADDRESS	
NAME	JOYCE, EDWIN A JR.	CITY - ST - ZIP	
STREET ADDRESS	14130 NORTH MERIDIAN ROAD		
CITY - ST - ZIP	TALLAHASSEE FL 32312-9753		
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<p>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</p>			
SIGNATURE: <u>Edwin A. Joyce Jr.</u>		Date _____ Daytime Phone # _____	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			



1st MOORE CR2E003 (10/06)

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