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

## DOCUMENT # A14464

1. Entity Name

STAPLE CHECK HERE

NAME STREET ADDRESS CITY-ST-ZIP

CAMPBELL ARMS LIMITED PARTNERSHIP



**FILED** Apr 14, 2006 08:00 AN Secretary of State

Principal Place of Business

LOS ANGELES, CA 90025

Mailing Address

12100 WILSHIRE BLVD STE 1400

12100 WILSHIRE BLVD

STE 1400

LOS ANGELES, CA 90025

US



## DO NOT WRITE IN THIS SPACE

03302006 No Chg-LP CR2E003 (11/05)

4. FEI Number 58-1566533

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DOUGLAS H. REYNOLDS, P.A. 4875 NORTH FEDERAL HIGHWAY, 10TH FLOOR SOUTHTRUST BANK BUILDING FORT LAUDERDALE, FL 33308

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changing its ions of registered agent.	registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title (I applicable.	DATE
	FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$900	0.00
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#	P04497	· · · · · · · · · · · · · · · · · · ·
NAME	WILSHIRE INVEST, CORP.	
STREET ADDRESS	12100 WILSHIRE BLVD	
City-st-Zip	LOS ANGELES, CA	Uninging again to the control of the
DOCUMENT #		U00000\$09017 04/28/06-80028-009 500,00
NAME		34/ COLAGLAGIGESTAND 306* 08: 1
STREET ADDRESS		
CITY-ST-ZIP		
DOCUMENT #		en e
NAME		
STREET ADDRESS		DO NOT WRITE
CITY-ST-ZIP		DO NOT WINTE
		IN THIS SPACE
DOCUMENT #		IN THIS STAGE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
DOCUMENT #		1
NAME		
STREET ADDRESS		i
CITY-ST-ZIP		_1
DOCUMENT#		

I hereby certify that the information supplied with this filling 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 adcurate 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 exacute this jepqit as required by Chapter 620, Florida Statutes 14. I hereby certify that the information supplied with

Wilshire Investments Corporation, G.P. By: Jay Wall, Vice President SIGNATURE:

Daytime Phone #