


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 MAY 19 AM 10:19

DOCUMENT # A28024 1. Entity Name CA SOUTHPARK INVESTORS, L.P., A GEORGIA LIMITED PARTNERSHIP		
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Principal Place of Business 171 17TH STREET SUITE 1200 ATLANTA, GA 30363	Mailing Address 171 17TH STREET SUITE 1200 ATLANTA, GA 30363
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



05022006 Chg-LP CR2E003 (11/05)

4. FEI Number 58-1835965	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MIKALS, JOHN J 2000 INDEPENDENT SQUARE JACKSONVILLE, FL 32202		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 _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$900.00
On or after September 6, 2006, Fee will be \$1000.00

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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	NAME	STREET ADDRESS	000076017270
STREET ADDRESS	GLASS, L. FREDERICK JR. ESTATE	CITY-ST-ZIP	06/08/06--01034--015 **900.00
CITY-ST-ZIP	3745 BANYON LANE ALPHARETTA, GA 30022		
DOCUMENT #	NAME	STREET ADDRESS	171 17th Street Suite 1200
STREET ADDRESS	B93000000163 M P DEVELOPMENT, LTD.	CITY-ST-ZIP	Atlanta, GA 30363
CITY-ST-ZIP	1275 PEACHTREE ST., NE ATLANTA, GA		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	BEALLE, JAMES W.	CITY-ST-ZIP	
CITY-ST-ZIP	6180 WEATHERLY DR NW ATLANTA, GA		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	CARSON, JAMES B. JR.	CITY-ST-ZIP	
CITY-ST-ZIP	3520 NANCY CREEK RD ATLANTA, GA		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	RATHER, DANIEL B.	CITY-ST-ZIP	
CITY-ST-ZIP	2525 PEACHTREE ST #32B ATLANTA, GA		
DOCUMENT #	NAME	STREET ADDRESS	
STREET ADDRESS	STEVENSON, PHILIP S	CITY-ST-ZIP	
CITY-ST-ZIP	940 WEYMAN COURT ATLANTA, GA 30328		

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: _____ Date: 5/4/06 Daytime Phone #: 404-888-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE