


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # A33311 1. Entity Name JACKSONVILLE PROPERTIES ASSOCIATES, LLLP	
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Principal Place of Business 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016-5897	Mailing Address 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016-5897
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04242006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0349842	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

**RODRIGUEZ, CHRISTY
7900 MIAMI LAKES DRIVE WEST
MIAMI LAKES, FL 33016-5897**

**DO NOT WRITE
IN THIS SPACE**

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 \$500.00
After May 1, 2006, Fee will be \$900.00

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 #	S68588
NAME	KISLAK REALTY EQUITIES, INC.
STREET ADDRESS	7900 MIAMI LAKES DRIVE W
CITY-ST-ZIP	MIAMI LAKES, FL
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000538652
05/09/06-80069-003 500.00

**DO NOT WRITE
IN THIS SPACE**

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: *Christy Rodriguez*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER
Christy Rodriguez

4/25/2006 *305-364-4101*
Date Daytime Phone #

STAPLE CHECK HERE