

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # A33363

1. Entity Name
PEMBROKE BUILDING ASSOCIATES, LTD.



Principal Place of Business
**3740 BEACH BOULEVARD, SUITE 300
JACKSONVILLE, FL 32207**

Mailing Address
**3740 BEACH BOULEVARD, SUITE 300
JACKSONVILLE, FL 32207**



01182006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3139855

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**DEMETREE, J. C., JR.
3740 BEACH BOULEVARD, SUITE 300
JACKSONVILLE, FL 32207**

**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

Signature, typed or printed name of registered agent and title if applicable

DATE

**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 # **V60195**
NAME **PEMBROKE BUILDING ASSOCIATES, INC.**
STREET ADDRESS **3740 BEACH BLVD., #300**
CITY-ST-ZIP **JACKSONVILLE, FL**

DOCUMENT # **P40240**
NAME **OLNAP, INC.**
STREET ADDRESS **4425 CORPORATION LN, #400**
CITY-ST-ZIP **VIRGINIA BEACH, VA**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

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01/30/06-80013-013 508.75

**DO NOT WRITE
IN THIS SPACE**

STAPLE CHECK HERE

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:

J. C. DEMETREE, JR., PRESIDENT 01-20-06 (904) 398-7350

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #