

# 2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A93000001129

FILED  
Apr 11, 2006  
Secretary of State

**Entity Name:** PHILIP T. MURPHEY INVESTMENTS, LTD.

**Current Principal Place of Business:**

6802 COMMONWEALTH AVE.  
JACKSONVILLE, FL 32205

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 37888  
JACKSONVILLE, FL 33236

**New Mailing Address:**

**FEI Number:** 59-3208767

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MURPHEY, PHILIP W  
6802 COMMONWEALTH AVE.  
P.O. BOX 37888  
JACKSONVILLE, FL 32236 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**GENERAL PARTNER INFORMATION:**

Document #:

Name: MURPHEY, PHILIP T  
Address: P. O. BOX 37888  
City-St-Zip: JACKSONVILLE, FL 32236  
Document #:

Name: MURPHEY, PHILIP W  
Address: P.O. BOX 37888  
City-St-Zip: JACKSONVILLE, FL 32236

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: PHILIP W MURPHEY

MR

04/11/2006

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date