

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 MAR 10 AM 10:48

DOCUMENT # A93000001134

1. Entity Name
GOODBY'S EXECUTIVE PROPERTIES, LTD.



Principal Place of Business
8810 GOODBY'S EXECUTIVE DRIVE, SUITE A
JACKSONVILLE, FL 32217

Mailing Address
8810 GOODBY'S EXECUTIVE DRIVE, SUITE A
JACKSONVILLE, FL 32217

DO NOT WRITE IN THIS SPACE

02282006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
59-3212377

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, KEITH H
8810 GOODBY'S EXECUTIVE DRIVE, SUITE A
JACKSONVILLE, FL 32217

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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 # L93000000235
NAME GOODBY'S EXECUTIVE PROPERTIES, L.C.
STREET ADDRESS 8810 GOODBY'S EXECUTIVE DRIVE, SUITE A
CITY-ST-ZIP JACKSONVILLE, FL 32217

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600068093666
03/20/06--01015--010 **500.00

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE