

**2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006**

**FILED
Feb 13, 2006 08:00 AM
Secretary of State**

DOCUMENT # A94000001856

1. Entity Name
**THE JAMES AND PHYLLIS ADAMS FAMILY
PARTNERSHIP, LTD.**



Principal Place of Business
**610 HOWARD AVENUE
LAKELAND, FL 33815**

Mailing Address
**610 HOWARD AVENUE
LAKELAND, FL 33815**



01062006 No Chg-LP CR2E003 (11/05)

4. FEI Number **59-3287681** Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ADAMS, JAMES L JR.
610 HOWARD AVENUE
LAKELAND, FL 33815**

**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 #	NAME	STREET ADDRESS	CITY-ST-ZIP
	ADAMS, JAMES L JR.	610 HOWARD AVENUE	LAKELAND, FL 33815
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02/23/06-80079-020 500.00

**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: *James L Adams Jr* GP 1 2-7-06 1863-682-5506