2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED May 01, 2006 08:00 Al Secretary of State DOCUMENT # A95000000733 1. Entity Name ANCHORS STREET, LTD. Mailing Address Principal Place of Business 4652 GULF STARR DR. P.O. BOX 1735 DESTIN, FL 32541 DESTIN, FL 32540 02212006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3319335 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ODOM, JAY A DO NOT WRITE 4652 GULF STARR DR. DESTIN, FL 32541 IN THIS SPACE 3. 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, 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 # M77260 WATERS EDGE BUILDING COMPANY U00000558110 05/17/06-80081-014 500.00 NAME STREET ADDRESS 4652 GULF STARR DR. DESTIN, FL 32541 CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS DITY-ST-71P DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CiTY-ST-ZIP DOCUMENT

14. I hereby certify that the information supplied with indicated on this report is true and accurate and does not qually for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the Information inature shalf have the same legal effect as if made under oath; that I am a General Partner of the limited partnership as required by Chapter 620, Florida Statutes or the receiver or trustee empowered to execut

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP