2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006

SIGNATURE

Mar 08, 2006 08:00 AM Secretary of State DOCUMENT # A95000001089 TIBBETTS FAMILY LIMITED PARTNERSHIP Mailing Address Principal Place of Business 3300 FAIRFIELD AVENUE SOUTH \$1. PETERSBURG FL 33712 3300 FAIRFIELD AVENUE SOUTH ST. PETERSBURG FL 33712 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E003 (10/05) Applied For City & State City & State 4. FEI Number 59-3327895 Not Applicate Zip Country Zip Country ; \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BRANDES, RUSSEL P Street Address (P.O. Box Number is Not Acceptable) 3300 FAIRFIELD AVENUE SOUTH ST. PETERSBURG FL 33712 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office of 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 ritle it applicable. FILE NOW!!! Fee is \$500. *** After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State 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. GENERAL PARTNER INFORMATION 13. 12. DOCUMENT # STREET ADDRESS NAME TIBBETTS, LINTON N TRUSTEE STREET ADDRESS 3300 FAIRFIELD AVENUE SOUTH CITY-ST-ZIP U00000459215 CITY-SI-ZIP ST. PETERSBURG FL 33712 03/18/06-80024-002 508.75 DOCUMENT# STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DOCUMENT # STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CDY-SI-79 CITY-ST-27P HE RE DOCUMENT # STREET ADDRESS CHECK STREET ADDRESS CHTY-ST-ZIP CITY-ST-ZIP STAPLE DOCUMENT # STREET ADORESS NAME STREET ADDRESS CITY-ST-ZIP 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 fimited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

RETG LINTON N.TIBBETTS 3/6/06

FILED