2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
May 01, 2006 08:00 AM
Secretary of State

DOCUMENT # A95000001971

1. Entity Name
THE KIRKLAND FAMILY LIMITED PARTNERSHIP

Principal Place of Business	Mailing Address
4328 STATE ROAD 44 NEW SMYRNA BEACH, FL 32168	4328 STATE ROAD 44 NEW SMYRNA BEACH, FL 32168

~~BOS 4500453 100030796~~
~~DEPOSIT ONLY 500.00 SC~~

DO NOT WRITE IN THIS SPACE

04262006 No Chg-LP CR2E003 (11/05)

4. FEI Number
59-3363033
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

KIRKLAND, ELMER R
4328 STATE ROAD 44
NEW SMYRNA BEACH, FL 32168

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 _____ DATE
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

U00000554363
05/15/06-80099-012 500.00

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	KIRKLAND, ELMER R
STREET ADDRESS	4328 STATE ROAD 44
CITY-ST-ZIP	NEW SMYRNA BEACH, FL 32168
DOCUMENT #	
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STAPLE CHECK HERE

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: Elmer R Kirkland 4/26/06 386-428-9855
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #