

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 6, 2006**

**FILED**  
**Aug 14, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A96000000865</b>	
1. Entity Name <b>JACK F. WAYBRANT FAMILY LIMITED PARTNERSHIP</b>	
Principal Place of Business <b>814 EAST KELLER COURT HERNANDO, FL 34442</b>	Mailing Address <b>814 EAST KELLER COURT HERNANDO, FL 34442</b>



08012006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3378551</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>WAYBRANT, BETTY J 814 EAST KELLER COURT HERNANDO, FL 34442</b>
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**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**  
**Due by September 6, 2006**

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**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	<b>WAYBRANT, BETTY J</b>
STREET ADDRESS	<b>814 EAST KELLER COURT</b>
CITY-ST-ZIP	<b>HERNANDO, FL 34442</b>
DOCUMENT #	
NAME	<b>WAYBRANT, STEVEN L TRUSTEE</b>
STREET ADDRESS	<b>814 EAST KELLER COURT</b>
CITY-ST-ZIP	<b>HERNANDO, FL 34442</b>
DOCUMENT #	
NAME	<b>WAYBRANT, GARY L TRUSTEE</b>
STREET ADDRESS	<b>814 EAST KELLER COURT</b>
CITY-ST-ZIP	<b>HERNANDO, FL 34442</b>
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

U000000574192  
08/14/06-80002-005 500.00

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:** *Betty J. Waybrant*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*8/8/06*

Date

*352-746-7078*

Daytime Phone #

STAPLE CHECK HERE