

FILED
Apr 18, 2006 08:00 AM
Secretary of State

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A96000001240

1. Entity Name
APALACHEE ENTERPRISES, LTD.



Principal Place of Business
1222 WAVERLY RD
TALLAHASSEE, FL 32312

Mailing Address
212 HOFFMAN DR.
TALLAHASSEE, FL 32312



04072006 No Chg-LP CR2E003 (11/05)

4. FEI Number 59-3392233	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
OWEN WILDE, JUDITH
212 HOFFMAN DR
TALLAHASSEE, FL 32312

DO NOT WRITE
IN THIS SPACE

6. 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
OWEN, WILLIAM C
2803 RABBIT HILL ROAD
TALLAHASSEE, FL 32312

U000000518356
05/02/06-80007-020 \$00.00

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
WILDE, JUDITH O
1222 WAVERLY RD.
TALLAHASSEE, FL 32312

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE
IN THIS SPACE

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 820, Florida Statutes.

SIGNATURE:

Tom C. Owen

(Signature and typed or printed name of signing general partner)

4/16/06 5B-0600
Date Daytime Phone #