2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT # A9700000035

1. Entity Name

EMERSON ARMS APARTMENTS, LTD.

FILED Apr 14, 2006 08:00 AN Secretary of State

Principal Place of Business

3740 BEACH BLVD., SUITE 300 IACKSONVILLE, FL 32207

Mailing Address

3740 BEACH BLVD., SUITE 300 JACKSONVILLE, FL 32207



DO NOT WRITE IN THIS SPACE

04062006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 59-1287029

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EMERSON ARMS APARTMENTS, INC. 3740 BEACH BLVD., SUITE 300 JACKSONVILLE, FL 32207

DO NOT WRITE IN THIS SPACE

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|---|--|--|--|
| | named entity submits this statement for the purpose of changing its regions of registered agent. | pistered office or registered agent, or both, in the | e State of Florida. I am familiar with, and accept |
| 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 \$900.0 | o | |
| 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 # | P97000000384 | | |
| NAME . | EMERSON ARMS APARTMENTS, INC. | | |
| STREET ADDRESS | 3740 BEACH BLVD., SUITE 300 | | U00000511191^M |
| CITY - ST - ZIP | JACKSONVILLE, FL 32207 | 04/29/06-80 |)040-005 508.75^H |
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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 cath; 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:

STAPLE CHECK HERE

SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING GENERAL PARTNER

//7/06 Date

Daytime Phone #