


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # A97000001348
 1. Entity Name
 DFS OF NORTHWEST FLORIDA, LTD.



Principal Place of Business 985 ROYCE STREET PENSACOLA, FL 32503	Mailing Address 985 ROYCE STREET PENSACOLA, FL 32503
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DO NOT WRITE IN THIS SPACE



01172006 No Chg-LP CR2E003 (11/05)

4. FEI Number 59-3459895	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SLAUGHTER, DERREL F
 985 ROYCE STREET
 PENSACOLA, FL 32503

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

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	SLAUGHTER, DERRELL F TRUSTEE
STREET ADDRESS	985 ROYCE STREET
CITY-ST-ZIP	PENSACOLA, FL 32503
DOCUMENT #	
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 01/27/06-80015-010 500.00

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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: DERREL F. SLAUGHTER 1-19-06 850 477 4704
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #