

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 10, 2006 08:00 AM
Secretary of State

DOCUMENT # A97000001882

1. Entity Name
COMMUNITY INVESTMENTS OF TALLAHASSEE, LTD.



Principal Place of Business

**1809 MICCOSUKEE COMMONS DRIVE, STE. 112
TALLAHASSEE, FL 32308**

Mailing Address

**P.O. BOX 14019
TALLAHASSEE, FL 32317-4019**



01102006 No Chg-LP

CR2ED03 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3383604

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**NOBLIN, MILLARD
1809 MICCOSUKEE COMMONS DRIVE, STE. 112
TALLAHASSEE, FL 32308**

**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
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
**NOBLIN, MILLARD
1809 MICCOSUKEE COMMONS DRIVE, STE. 112
TALLAHASSEE, FL 32308**

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1100000461695
03/21/06-80005-023 500.00

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IN THIS SPACE**

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

Millard J. Noblin

3/7/2006

(850)877-5841

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE