2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT # A98000000961

1996 GALBRAITH OIL AND GAS PARTNERSHIP, LTD.



Mailing Address P.O. BOX 4920 ORLANDO, FL 32802-4920

600



DO NOT WRITE IN THIS SPACE

01242006 No Chg-LP

FILED

Mar 13, 2006 08:00 AM

Secretary of State

4. FEt Number 59-3375729

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Regulred

6. Name and Address of Current Registered Agent

GALBRAITH, JAMES C 450 S. ORANGE AVENUE ORLANDO, FL 32801-3336

Principal Place of Business

450 S. ORANGE AVENUE

ORLANDO, FL 32801-3336

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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 it expolicable.

DATE

FILE NOW!!! FEE 13 \$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 I NAME STREET ADDRESS CITY - ST - ZIP	GALBRAITH, JAMES C 450 S. ORANGE AVENUE ORLANDO, FL 328013336
	BOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	698955 THE GALBRAITH MANAGEMENT COMPANY, INC.
	DOCUMENT # HAME STREET ADDRESS CITY-ST-ZIP	
מיויי גב ביוובטיו ווסינר	DOCUMENT A HAME STREET ADDRESS CITY-ST-ZIP	
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	
ş	14. Ungreby	certify that the information supplied with this filing does not qualify for

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I horeby certify that the information supplied with this filling 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 tegal 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:

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