## 2006 LIMITED PARTNERSHIP ANNUAL REPORT

## **FILED** Apr 06, 2006 08:00 AM

		Due By	y May 1, 2006	Secretary of State			
	DOCU 1-Entity Nem	MENT # A98000					
ź		Ö, LIMITED PARTNER	SHIP				
	111 PRINCE	ce at Business SS STREET I, NC 28401	Mailing Address P.O. BOX 2628 WILMINGTON, NC 28402			n <b>i k</b> an <b>i ka</b> t	) 
			<del></del>				
	_	NO NOT WE	CE	01102006 No Chg-LP	CR2I	E003 (11/05)	
	L	DO NOT WRITE IN THIS SP			4. FEI Number 56-2085012	. <u> </u>	Applied For Not Applicable
					5. Certificate of Status Desired		\$8.75 Additional Fee Required
		6. Name and Address of Co	errent Registered Agent	┪			
	1200 SOU	C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			DO NOT W IN THIS SF		
	3. 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 applicable					DATE	
	FILE NOW!!! FEE IS \$500.00 After May 1, 2006, Fee will be \$800.00						
	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.	· · · · · · · · · · · · · · · · · · ·	RTNER INFORMATION				
	DOCUMENT / NAME	P98000042569 ZP NO. 60 MEMBER, INC.	1				
	STREET ADDRESS	111 PRINCESS STREET	<b>i</b>				
	DOCUMENT # NAME STREET ADDRESS	WILMINGTON, NC 28401					94829 0061-008 <b>500.</b> :
Г	DOCUMENT #						
	NAME STREET ADDRESS CITY-ST-DP				DO NOT WRITE		
396	DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPA	ACE	
CHECK HER	DOCUMENT #  NAME STREET ADDRESS CITY-ST-ZIP						
STAPLE	DOCUMENT # NAME						

14. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accordance and that my signature shall have the same legal effect as if made under each; that I am a General Partner of the limited partnership or the receiver or trustee empowered by execute this report as required by Chapter 620, Florida Statutes

BY: ZP NO 60 MEMBER, INC.

SIGNATURE:

STREET ADDRESS CHY-ST-ZIP

the and type of the mane of signing general partner Jeffrey L. Zimmer, President

910/763-4669 Daytime Phone #