2006 LIMITED PARTNERSHIP ANNUAL REPORT

Mar 13 2006 08:00 AM

Due By May 1, 2006				Wiar 13, 2000 06:00 Alv	
DOCUMENT # A98000002865				Secretary of State	
1. Entity Nam LOFTIN F	B AMILY PARTNERSHIP, LTD.	*			
Principal Place 2101 BARRA PENSACOLA	NCAS 2	iiing Address 101 BARRANCAS ENSACOLA, FL 32501			
<u>-</u>					
DO NOT WRITE IN THIS SPACE			CE	4. FEI Number	CR2E003 (11/05) Applied For
				59-3548683 5. Certificate of Status Desired	Not Applicable \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent LOFTIN, JOE M 2101 BARRANCAS				DO NOT WE	RITE
PENSACOLA, FL 32501		IN THIS SPACE			
the obligat	named entity submits this statement for the plants of registered agent.	urpose of changing its register	ed office or register	red agent, or both, in the State of Florid	a. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and IIII I	EE IS \$500.00			OATE
		Fee will be \$900.00 IS A BUSINESS ENTITY M	UST BE REGIS	TERED AND ACTIVE WITH THIS	OFFICE.
12.	GENERAL PARTNER INFO		i, an amenamen	te the de the the discounty of goth	
DOCUMENT #	P98000096172 LOFTIN FAMILY COMPANY				
STREET ADDRESS	2101 BARRANCAS PENSACOLA, FL 32501				
DOCUMENT / NAME STREET ADDRESS	PENGROOM, PE 02001			16000046 93/22/06-80	5521 940-015 500.80
GITY-ST-ZIP DOCUMENT #					
NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WR	
DOCUMENT # NAME STREET ADDRESS GITY-ST-ZIP				IN THIS SPA	CE
DOCUMENT / MAME STREET ADDRESS CITY-ST-ZIP					
DOCUMENT # NAME.					

14. I hereby certify that the information supplied with this tilling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report if 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 trusteetempowered to execute this report as required by Snapter 620, Florida Statutes

SIGNATURE;

DOCUMENT # NAME. STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Daytime Phone #