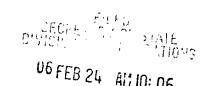
2006 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2006 **DOCUMENT # A98000002921** 1. Entity Name
AMALIE AOC, LTD. Mailing Address Principal Place of Business ONE HARBOUR PLACE 1601 MCCLOSKEY BOULEVARD 777 S. HARBOUR ISLAND BOULEVARD TAMPA, FL 33602-5799 TAMPA, FL 33605





DO NOT WRITE IN THIS SPACE

01192006 No Chg-LP CR2E003 (11/05)

4. FEI Number	Applied For
59-3638726	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

BARKETT, KENNETH D ESQ 1601 MCCLOSKEY BLVD. TAMPA, FL 33605

STAPLE CHECK HERE

SIGNATURE:

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	
FILE NOW!!! FEE IS \$500.00 After May 1, 2008, 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	535380 PACKERS ACQUISITION CO 1601 MCCLOSKEY BOULEVARD TAMPA, FL 33605	700067315107		
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DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				
DOCUMENT # *NAME STREET ADDRESS CITY-ST-ZIP				
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				