

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A99000001926

1. Entity Name
GULFPORT SOUTH LIMITED PARTNERSHIP



*Principal Place of Business
**267 SIXTH AVENUE NORTH
 TIERRA VERDE, FL 33715-1866**

Mailing Address
**267 SIXTH AVENUE NORTH
 TIERRA VERDE, FL 33715-1866**

DO NOT WRITE IN THIS SPACE

FILED

06 MAY 31 AM 9:27

**SECRETARY OF STATE
 TALLAHASSEE FLORIDA**



03292006 No Chg-LP CR2E003 (11/05)

4. FEI Number **59-3609182** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WALLACE, JOHN W
 267 SIXTH AVENUE NORTH
 TIERRA VERDE, FL 33715-1866**

**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 #	WALLACE, JOHN W TRUSTEE 267 SIXTH AVENUE NORTH TIERRA VERDE, FL 337151866
DOCUMENT #	WALLACE, SHIRLEY A TRUSTEE 267 SIXTH AVENUE NORTH TIERRA VERDE, FL 337151866
DOCUMENT #	

9000075558588
 05/31/06--01032--006 **\$500.00

**DO NOT WRITE
 IN THIS SPACE**

STAPLE CHECK HERE

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

5/15/06