2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

Due By May 1, 2006 DOCUMENT # B0000000058

1. Entity Name
JACKSONVILLE FLEMING 501, LP

Principal Place of Business 3585 HIGHWAY 17 ORANGE PARK, FL 32073 Mailing Address 201 N. ILLINOIS ST., 23RD FLOOR INDIANAPOLIS, IN 46204

FILED Mar 06, 2006 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

02072006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 35-2099867 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 DO NOT WRITE
IN THIS SPACE

8	The above named entity submits this statement for the purpose of changing its the obligations of registered agent.	registered office or registered agent, or both, in the	e State of Florida.	I am familiar with, and accept
	the obligations of registered agent.			144
		r i r s	431° 400° 2000	אמי הימים היים אבי

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

03/15/06-80070-023 500.00

FILE NOW!!! FEE !S \$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 # NAME STREET ADDRESS CITY-ST-2P	F00000001147 JACKSONVILLE FLEMING 501 MANAGEMENT, INC. 201 N. ILLINOIS STREET, 23RD FLOOR INDIANAPOLIS, IN 46204	
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14. I hereby 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 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

CALLER OF PRINTED NAME OF SIGNING GET

Sacksonville Floming Sol Mant

2/10/06

237-2900

Daytime Phone #

By Joyce A. Brodley