2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
May 02, 2006 08:00 AM
Secretary of State

DOCUMENT # B03000000446

1. Entity Name
GB/JT HOTEL PARTNERS, L.P.

Principal Place of Business	Mailing Address
C/O CORPORATION SERVICE COMPANY 2711 CENTERVILLE RD, STE 400 WILMINGTON, DE 19808	3250 MARY ST, 5TH FLOOR MIAMI, FL 33133

DO NOT WRITE IN THIS SPACE

04242006 No Chg-LP CR2E003 (11/05)

4. FEI Number
20-0503868
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON, PA - RICHARD E SCHATZ, ESQ
150 W FLAGLER ST, STE 2200
MIAMI, FL 33130

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

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 #	M03000004085
NAME	GB/JT MANAGEMENT, LLC
STREET ADDRESS	3250 MARY ST, 5TH FLOOR
CITY-ST-ZIP	MIAMI, FL 33133
DOCUMENT #	
NAME	
STREET ADDRESS	
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05/18/06-80002-026 500.00

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: Sherwood M. Weiser 4/27,2006 305-445-2493
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #