


**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By September 6, 2006**

<b>DOCUMENT # B04000000192</b>					
<b>1. Entity Name</b> LEISURE AMERICAN VACATION RENTALS, LTD.					
<b>Principal Place of Business</b> 5601 EDMOND SUITE M WACO TX 76710			<b>Mailing Address</b> 5601 EDMOND SUITE M WACO TX 76710		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		<b>4. FEI Number</b> 11-3713827	
Zip		Country		05122006 Chg-LP CR2E003 (11/05)	
Zip		Country		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
BELLI, PHILLIP 2450 ESTERO BLVD. FT. MYERS, FL 33931			Name Street Address (P.O. Box Number is Not Acceptable) City		
			FL Zip Code		
<b>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.</b>					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW!!! FEE IS \$900.00</b> <b>On or after September 6, 2006, Fee will be \$1000.00</b>					
<b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b> <b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>					
<b>12. GENERAL PARTNER INFORMATION</b>			<b>13. ADDRESS CHANGES ONLY</b>		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	M04000001749 PBMP ASSET MANAGEMENT, L.L.C. 5601 EDMOND, SUITE M WACO, TX 76710		STREET ADDRESS CITY-ST-ZIP		
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<b>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</b>					
<b>SIGNATURE:</b> <i>[Signature]</i> <i>PBMP Asset Mgr, LLC.</i> <i>Michael Lewis Member</i> <span style="float: right;"><i>5/10/06</i></span>					

**FILED**

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SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



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