2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By September 6, 2006

DOCUMENT # B96000000487 WORTHINGTON APARTMENTS LIMITED PARTNERSHIP Mailing Address Principal Place of Business 3332 SOUTH MAGNOLIA DR 3190 NORTHEAST EXPRESSWAY STE 410 ATLANTA, GA 30341 TALLAHASSEE, FL 32301 07032006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 58-2271632 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 3230 IN THIS SPACE hanging its registered office or registered agent, or both, in the State of Florida. I/am familiar with, and accept 8. The above named entity submits this statement to he purpose d the obligations of SIGNATURE FILE NOW!!! FEE IS \$900.00 On or after September 6, 2006, Fee will be \$1000.00 $m{\prime}$ 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. GENERAL PARTNER INFORMATION 12. DOCUMENT # F96000006318 DB GENERAL PARTNER, INC. NAME STREET ADDRESS 3190 NORTHEAST EXPRESSWAY, SUITE 410 U00000576224 CITY-ST-ZIP ATLANTA, GA 30341 09/06/06-80002-015 908.75 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT / NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

14. I hereby certily 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 #