


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 06 MAR 27 AM 10:43

DOCUMENT # B98000000508			
1. Entity Name JENNINGS ROAD PARTNERS L.P. <i>Super Days</i>			
Principal Place of Business 850 SW MARTIN DOWNS BL. PALM CITY, FL 34990		Mailing Address P.O. BOX 359 STUART, FL 34995	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
O'DONNELL, CHAR ADMIN. 850 SW MARTIN DOWNS BL. PALM CITY, FL 34990		Name Stanley R. Garris	
		Street Address (P.O. Box Number is Not Acceptable)	
		850 SW Martin Downs Blvd.	
		City Palm City	FL 34990
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 <i>Stanley R. Garris</i>		Stanley R. Garris	
Signature, typed or printed name of registered agent and title if applicable		DATE	
		2-1-2006	
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		13. ADDRESS CHANGES ONLY	
DOCUMENT #	GARRIS, STANLEY R	STREET ADDRESS	850 SW Martin Downs Blvd.
NAME	75356 AUGUSTA DRIVE	CITY-ST-ZIP	Palm City, Florida 34990
STREET ADDRESS	INDIAN WELLS, CA 92210		
CITY-ST-ZIP			
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
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: <i>Stanley R. Garris</i>		Stanley R. Garris	
Signature and typed or printed name of signing general partner		Date	
		772-287-1844	
		Daytime Phone #	

STAPLE CHECK HERE



01272006 Chg-LP CR2E003 (11/05)

4. FEI Number
65-0845256

Applied For
Not Applicable

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

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04/10/06--01018--024 **500.00