


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

**FILED
Aug 31, 2006 08:00 AM
Secretary of State**

DOCUMENT # A99000000660
1. Entity Name
MANSUR STORAGE PARTNERS, LTD.



Principal Place of Business 875 N MICHIGAN AVENUE, SUITE 3620 CHICAGO, IL 60611	Mailing Address 875 N MICHIGAN AVENUE, SUITE 3620 CHICAGO, IL 60611
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DO NOT WRITE IN THIS SPACE



07212006 No Chg-LP CR2E003 (11/05)

4. FEI Number 65-0911293	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MANSUR, E. BARRY
1117 SCHEFFLERA DRIVE
CAPTIVA, FL 33924**

DO NOT WRITE IN THIS SPACE

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
Due by September 6, 2006**

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

**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-ZIP	P97000104892 FLORIDA ATLANTIC REALTY CORPORATION 875 N. MICHIGAN AVENUE #3620 CHICAGO, IL 60611
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000000575723
08/31/06-80001-006-500.00

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: _____ **8-30-06** **312-263-2400**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #