2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # B00000000091

1. Entity Name
NBBJ LP

FILED
06 MAY -1 AM 8:44
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business	Mailing Address
111 SOUTH JACKSON SEATTLE, WA 98104	111 SOUTH JACKSON SEATTLE, WA 98104

03282006 Chg-LP CR2E003 (11/05)

2. Principal Place of Business		3. Mailing Address	
223 Yale Avenue North		223 Yale Avenue North	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Seattle, WA		City & State: Seattle, WA	
Zip: 98109	Country: USA	Zip: 98109	Country: USA

4. FEI Number: 91-1574838 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

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05/22/06--01004--004 **508.75

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	13.	ADDRESS CHANGES ONLY
DOCUMENT #	GP0400000247	STREET ADDRESS	
NAME	NBBJ PARTNERSHIP LLP		
STREET ADDRESS	111 SOUTH JACKSON	CITY-ST-ZIP	
CITY-ST-ZIP	SEATTLE, WA 98104		
DOCUMENT #		STREET ADDRESS	
NAME			
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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: Scott W. Wyatt 4/27/06 206 223 5555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

STAPLE CHECK HERE