


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

06 MAY -1 PM 1:46

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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| DOCUMENT # A00000000791 | |  |
| 1. Entity Name BLACKACRE PARTNERS, LTD. | | |

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| Principal Place of Business 4300 NORTH UNIVERSITY DRIVE, STE. D-103 LAUDERHILL, FL 33351 | Mailing Address 4300 NORTH UNIVERSITY DRIVE, STE. D-103 LAUDERHILL, FL 33351 |
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| 2. Principal Place of Business 1700 NW 66 AVE Suite, Apt. #, etc. #102 | 3. Mailing Address 1700 NW 66 AVE Suite, Apt. #, etc. #102 |
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|--------------------------------|--------------------------------|
| City & State Plantation, FL | City & State Plantation, FL |
| Zip 33313 | Country USA |



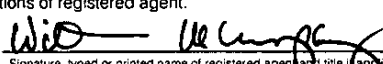
04042006 Chg-LP CR2E003 (11/05)

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| 4. FEI Number 65-1001708 | Applied For Not Applicable |
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| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent MURPHY, WILLIAM M 4300 NORTH UNIVERSITY DRIVE, STE. D-103 LAUDERHILL, FL 33351 |
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| 7. Name and Address of New Registered Agent Name William M. Murphy Street Address (P.O. Box Number is Not Acceptable) 1700 NW 66 Ave #102 City Plantation FL Zip Code 33313 |
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| 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  William Murphy DATE 4/4/06 |
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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 # NAME STREET ADDRESS CITY - ST - ZIP | P9500000888 BLACKPOOL ASSOCIATES, INC. 4300 NORTH UNIVERSITY DRIVE, STE. D-103 LAUDERHILL, FL 33351 | STREET ADDRESS CITY - ST - ZIP | 1700 NW 66 AVE #102 Plantation, FL 33313 |
| DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP | | STREET ADDRESS CITY - ST - ZIP | |
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05/17/06 01003 017 **500.00

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:  William Murphy DATE 4/4/06 746-2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Daytime Phone #

STAPLE CHECK HERE