

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 03, 2006 08:00 AM
Secretary of State

DOCUMENT # A01000000164 1. Entity Name BIGGS PARTNERSHIP, LTD.					
Principal Place of Business 801 SW SAN ANTONIO DRIVE PALM CITY, FL 34990			Mailing Address 801 SW SAN ANTONIO DRIVE PALM CITY, FL 34990		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		02032006 Chg-LP CR2E003 (11/05)	
4. FEI Number 65-1142126				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BIGGS, ARTHUR E 801 SW SAN ANTONIO DRIVE PALM CITY, FL 34990				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				FL Zip Code	
SIGNATURE <u><i>Arthur E. Biggs</i></u> <small>Signature, typed or printed name of registered agent and fee if applicable</small>				DATE <u>2/6/06</u>	
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 #	P97000107982		STREET ADDRESS	U000000417678	
NAME	GREENWICH CAPITAL CORPORATION		CITY-ST-ZIP	02/13/06-80066-003 500.00	
STREET ADDRESS	801 SW SAN ANTONIO DRIVE		STREET ADDRESS		
CITY-ST-ZIP	PALM CITY, FL 34990		CITY-ST-ZIP		
DOCUMENT #			STREET ADDRESS		
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STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: <u><i>Arthur E. Biggs</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER</small>			DATE <u>2/6/06</u>		
			DAYTIME PHONE # <u>772-597 5862</u>		

STAPLE CHECK HERE