

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED
PARTNERSHIP
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 MAR 27 AM 9:54

DOCUMENT # A01000000232

1. Name of Limited Partnership

WALSH FAMILY ENTERPRISES, LTD.

2. Principal Office Address 3107 STIRLING ROAD	3. Mailing Office Address 25 PENNSTOCK LANE		
Suite, Apt. #, etc. SUITE 105	Suite, Apt. #, etc.		
City & State FT. LAUDERDALE, FL	City & State MARSHFIELD, MA		
Zip 33312	Zip 02050	Country USA	Country USA

CR2E039 (11/05)

4. Date Formed or Registered
To Do Business in Florida

02/15/2001

5. FEI Number

65-1077044

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

7. FEES:

Filing Fee(s): \$411.25 for each year due this office.

Supplemental Fee(s): \$88.75 for each year due this office.

Penalty Fee(s): \$500 for each year or part thereof limited
partnership revoked on our records

9. Pursuant to the provisions of section 620.1810 or 620.1909, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of Chapter 620, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) _____ DATE _____

(REGISTERED AGENT MUST SIGN)

**A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**

10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Numbers)	City, State and Zip Code	10a. Registration Document Number
WALSH MANAGEMENT, INC.	3107 STIRLING ROAD SUITE 105	FT. LAUDERDALE, FL 33312	P01000011047
		300069959033 04/10/06-01061-010	**1500.00
		REINSTATEMENT	04-06

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE Deborah E. Sloan DATE 3-8-06
Typed or Printed Name of General Partner Signing Form Deborah E. Sloan, President of Walsh Management, Inc., the General Partner Telephone Number 781-834-0830

LAW OFFICES
Singer & Associates

Bernard A. Singer, Esq.
Board Certified Tax Lawyer

FORT LAUDERDALE:
3107 Stirling Road
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REPLY TO:
FORT LAUDERDALE OFFICE

Of Counsel:
Stephen L. Cohen, Esq.
Admitted in New York

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March 14, 2006

Division of Corporations
Attn: Partnership Section
P.O. Box 6327
Tallahassee, Florida 32314

Re: Walsh Family Enterprises, Ltd.
Document # A01000000232

Dear Sir/Madam:

Enclosed is the Application for Limited Partnership Reinstatement for Walsh Family Enterprises, Ltd. along with a check in the amount of \$1,500 in payment of the Annual Report Fee for 2004, 2005 and 2006.

Due to a long illness resulting in death on November 15, 2005, my client was not aware of this late filing. Accordingly, it would be greatly appreciated if you would waive any penalties with this filing. To my knowledge my client did not receive any mailings in regards to the Annual Report renewals and this inadvertent non-receipt of the Annual Report Notices is the reason for the lateness.

Thank you in advance for your courtesies in this matter.

Very truly yours,



Bernard A. Singer, Esq.
BAS/ks
Enclosures