

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 15, 2006 08:00 AM
Secretary of State

DOCUMENT # A01000001265

1. Entity Name
 BURKE FAMILY LIMITED PARTNERSHIP



Principal Place of Business
 1421 WEST TERRA MAR DRIVE
 POMPANO BEACH, FL 33062

Mailing Address
 1421 WEST TERRA MAR DRIVE
 POMPANO BEACH, FL 33062



02222006 No Chg-LP CRZE003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1135853 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

BURKE, CATHERINE B
 1421 WEST TERRA MAR DRIVE
 POMPANO BEACH, FL 33062

**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
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

| | |
|----------------|---------------------------|
| DOCUMENT # | P01000079971 |
| NAME | BURKE HOLDINGS, INC. |
| STREET ADDRESS | 1421 WEST TERRA MAR DRIVE |
| CITY-ST-ZIP | POMPANO BEACH, FL 33062 |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| DOCUMENT # | |
| NAME | |
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| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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**DO NOT WRITE
 IN THIS SPACE**

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: *Catherine B Burke*

✓ 3-13-06 9549967064

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #