2006 LIMITED PARTNERSHIP ANNUAL REPORT

FILED

Due By May 1, 2006				Apr 28, 2006 08:00 Secretary of State
DOCUMENT # A0200000939 1. Entity Name CD68GP, LTD.				Secretary of State
Principal Place of Business 1350 E. NEWPORT CENTER DR., STE. 206 DEERFIELD BEACH, FL 33442 Mailing Address 1350 E. NEWPORT CENTER DR., DEERFIELD BEACH, FL 33442 DEERFIELD BEACH, FL 33442			R., <u>Ş</u> TE. 206 2	\$
DO NOT WRITE IN THIS SPACE				04212006 No Chg-LP
	6. Name and Address of Curren	t Registered Agent	7	Fee Required
KAY, JAMES R ESQ KAY LAW OFFICES 700 VILLAGE SQUARE CROSSING., STE 102B PALM BEACH GARDENS, FL 33410				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 the obligations of registered agent. U00000543336 SIGNATURE Signature, typed or provided name of registered agent and Site if applicable.				
	After May 1,	Will FEE IS \$500.00 2006, Fee will be \$900.00		
	A GENERAL PARTNER NOTE: General Partners M	THAT IS A BUSINESS ENTITY N AY NOT be changed on the form	NUST BE REGIST	TERED AND ACTIVE WITH THIS OFFICE. It must be filed to change a general partner.
12.	GENERAL PARTNE		•	
DOCUMENT #	P02000075711			
NAME CADICA ADORESE	CD68, INC.	3 075 000		
STREET ADDRESS CITY-ST-ZIP	1350 E. NEWPORT CENTER DI DEERFIELD BEACH, FL 33442			
DOCUMENT # NAME STREET ADDRESS C/TY-ST-ZIP				
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE
DOCUMENT # NAME STREET ADDRESS GITY-ST-ZIP				IN THIS SPACE
DUCUMENT / NAME SIRELI AUDRESS				
DOCUMENT #		48 1-5-114 1176-1176-1176-1176-1176-1176-1176-1176		

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 peport as required by Chapter 620, Florida Statutes

SIGNATURE:

STREET ADDRESS CHY-ST-ZIP

STAPLE CHECK HERE

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING GENERAL PARTNER

Linda G. Kassof

04/27/2006

(954) 428-4585

Date

Daytime Phone #