

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

06 MAR 27 AM 8:34

DOCUMENT # A03000000265

1. Entity Name
 COPANS STORAGE, LTD.



Principal Place of Business
 8135 LAKE WORTH RD
 SUITE B
 LAKE WORTH, FL 33467 US

Mailing Address
 8135 LAKE WORTH RD
 SUITE B
 LAKE WORTH, FL 33467 US

2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
HALPERIN, ELEANOR B ESQ. 1400 CENTRE PARK BLVD. SUITE 1000 WEST PALM BEACH, FL 33401				Name <i>Nancy B. Colman, Esq.</i> <small>Street Address (P.O. Box Number is Not Acceptable)</small> <i>Baritz & Colman LLP</i> <i>150 E Palmetto Pk Rd # 750</i> <small>City</small> <i>Boca Raton</i> <small>FL</small> <small>Zip Code</small> <i>33432</i>			

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 *Nancy B. C.* Signature, typed or printed name of registered agent and title if applicable.

3/6/06 DATE

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 #	M03000000601 COPANS STORAGE, LLC 8135 LAKE WORTH RD, STE B LAKE WORTH, FL 33467	STREET ADDRESS	
NAME		CITY-ST-ZIP	
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
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: *Bar*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3/9/06 561-357-0131
Date Daytime Phone #

STAPLE CHECK HERE