


**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**Apr 24, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # A16269</b> Entity Name <b>BELLEGATE ASSOCIATES, A MICHIGAN LIMITED PARTNERSHIP</b>	
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Principal Place of Business C/O SANBREEN COMPANY 1000 S. OLD WOODWARD AVE., SUITE 201 BIRMINGHAM, MI 48009	Mailing Address C/O SANBREEN COMPANY 1000 S. OLD WOODWARD AVE., SUITE 201 BIRMINGHAM, MI 48009
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01062006 No Chg-LP CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>38-2512426</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

RIVKIN, BERNARD  
5940 SW 19TH STREET  
PLANTATION, FL 33317

**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 #	NAME	STREET ADDRESS	CITY-ST-ZIP
	BROWN, EMERY	1000 S. OLD WOODWARD	BRIMINGHAM, MI 48009
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	RIVKIN, BERNARD	1000 S. OLD WOODWARD	BRIMINGHAM, MI 48009
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
	SAVIN, JOSEPH	1000 S. OLD WOODWARD	BRIMINGHAM, MI 48009
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP
DOCUMENT #	NAME	STREET ADDRESS	CITY-ST-ZIP

U00000531562  
05/06/06-80050-002 508.75

**DO NOT WRITE  
IN THIS SPACE**

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:** Bernard Rivkin BERNARD RIVKIN 4/18/06 208-647-3250  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE