


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Jan 23, 2006 08:00 AM
Secretary of State

DOCUMENT # A18547
 1. Entity Name
ST. ANDREWS - LINCOLN ASSOCIATES, L.P.



Principal Place of Business Mailing Address
155 EAST 55TH STREET #5-F 155 EAST 55TH STREET, SUITE 5F
NEW YORK, NY 10022 NEW YORK, NY 10022

DO NOT WRITE IN THIS SPACE



01102006 No Chg-LP CR2E003 (11/05)
 4. FEI Number Applied For
11-2716241 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
SIEGEL, RICHARD
1441 MAPLE FOREST DR.
CLEARWATER, FL 34624

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 # | F93000003560 |
| NAME | 420 LINCOLN ROAD, INC. |
| STREET ADDRESS | 155 EAST 55TH ST., STE. 5F |
| CITY-ST-ZIP | NEW YORK, NY 10022 |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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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: Marvin Sachs **MARVIN SACHS** 1/17/06 212-753-3232
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #