

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006

FILED

06 MAY 31 AM 11:53

SECRETARY OF STATE
 TALLAHASSEE FLORIDA



05172006 No Chg-LP CR2E003 (11/05)

4. FEI Number 11-2834957	Applied For Not Applicable
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

DOCUMENT # A25103

1. Entity Name
 STERLING METS, L.P.



Principal Place of Business
 SHEA STADIUM
 FLUSHING, NY 11368

Mailing Address
 ATTN: GENERAL COUNSEL
 SHEA STADIUM
 FLUSHING, NY 11368

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
 1201 HAYS ST
 SUITE 105
 TALLAHASSEE, FL 32301

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 \$900.00
On or after September 6, 2006, Fee will be \$1000.00

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 #	P16926
NAME	METS PARTNERS, INC.
STREET ADDRESS	SHEA STADIUM
CITY-ST-ZIP	FLUSHING, NY 11368
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

800076017298
 06/08/06--01034--016 **900.00

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: David P. Cohen Date: 5/19/06 Daytime Phone #: 718-565-4397

STAPLE CHECK HERE