

**2005 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

MCC

**DOCUMENT # A28605**

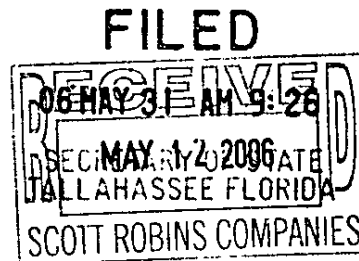
1. Entity Name  
**MCCRORY ASSOCIATES, LTD.**



Principal Place of Business  
**230 5TH STREET  
MIAMI BEACH, FL 33139**

Mailing Address  
**230 5TH STREET  
MIAMI BEACH, FL 33139**

**DO NOT WRITE IN THIS SPACE**



03152006 No Chg-LP CR2E003 (11/05)

4. FEI Number  
**65-0182863**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**ROBINS, SCOTT  
230 5TH STREET  
MIAM BEACH, FL 33139**

**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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**500075654555**  
**06/02/06--01003--018 \*\*500.00**  
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

DOCUMENT #	<b>L00067</b>
NAME	<b>MCCRORY ASSOCIATES, INC.</b>
STREET ADDRESS	<b>230 5TH STREET</b>
CITY-ST-ZIP	<b>MIAMI BEACH, FL 33139</b>

DOCUMENT #	
NAME	
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CITY-ST-ZIP	

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CITY-ST-ZIP	

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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: \_\_\_\_\_

**SCOTT ROBIN**

**MAR 30 2006**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE