

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

**FILED**  
**Feb 20, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A32211**

1. Entity Name  
**MAX SIEGEL TRUSTS, LTD.**



Principal Place of Business  
**C/O ESTELLE D. SIEGEL  
3160 BURGUNDY DRIVE, NORTH  
PALM BEACH GARDENS, FL 33410**

Mailing Address  
**C/O MYCFO, INC.  
3348 PEACHTREE ROAD, SUITE 500  
ATLANTA, GA 30080**



02072006 No Chg-LP

CR2E003 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0310825**

Applied For  
Not Applicable

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

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

**SIEGEL, ESTELLE D  
3160 BURGUNDY DRIVE, NORTH  
PALM BEACH GARDENS, FL 33410**

**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

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 #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SIEGEL, ESTELLE D TRUSTEE  
3160 BURGUNDY DR., NORTH  
PALM BEACH GARDENS, FL 33410**

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SIEGEL, ESTELLE D TRUSTEE  
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03/02/06 80030-002 500.00

**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:

*Estelle D. Siegel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

*2/10/06*

Date

Daytime Phone #

STAPLE CHECK HERE