2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

DOCUMENT # A94000000742 1. Entity Name DESIGNWORKS CREATIVE PARTNERSHIP, LTD. 06 FEB -8 All 9: 59 Principal Place of Business Mailing Address 250 ROYAL COURT 250 ROYAL COURT DELRAY BEACH, FL 33444 DELRAY BEACH, FL 33444 01162006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0464732 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DESIGNWORKS CREATIVE PARTNESHIP, INC. DO NOT WRITE 250 ROYAL COURT DELRAY BEACH, FL 33444 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, typed or printed name of registered agent and title if applicable. DATE FILE NOWIII 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 # P94000007143 DESIGNWORKS CREATIVE PARTNERSHIP, INC. NAME STREET ADDRESS 250 ROYAL COURT 200066122022 02/17/06--01010--019 **\$00.00 CITY-ST-ZIF DELRAY BEACH, FL 33444 DOCUMENT 4 NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADSRESS CITY-ST-ZP **DOCUMENTS** NAME STREET ADDRESS CITY-ST-ZIP

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:

IGNATURE OF TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

<u>2-2-06</u>

<u>561-272-6855</u>

Daytime Phone #