

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 06 FEB 20 AM 8:51

DOCUMENT # A94000001194 1. Entity Name EAST COAST FAMILY PARTNERS, LTD.					
Principal Place of Business C/O M. AXMAN 2525 PONCE DE LEON BLVD., SUITE 400 CORAL GABLES, FL 33134			Mailing Address C/O M. AXMAN 2525 PONCE DE LEON BLVD., SUITE 400 CORAL GABLES, FL 33134		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0527595	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				Name Michael B. Axman, Esq. Street Address (P.O. Box Number is Not Acceptable) 2525 Ponce De Leon Boulevard #400 City Coral Gables FL Zip Code 33134	
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 Michael B. Axman, Esq. February 8, 2006 <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
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			13. ADDRESS CHANGES ONLY		
DOCUMENT #	167052		STREET ADDRESS	2525 Ponce De Leon Blvd. #400	
NAME	EAST COAST REALTY CORP ORATION		CITY-ST-ZIP	Coral Gables, FL 33134	
STREET ADDRESS	2425 PONCE DE LEON BLVD., SUITE 400		200066805062 02/28/06 01022 022 **500.00		
CITY-ST-ZIP	NAPLES, FL 33134				
DOCUMENT #					
NAME					
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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.
East Coast Realty Corporation, a Florida corporation, General Partner
 SIGNATURE: By: **Marjorie Lawrence, President** 2/8/2006 (305) 460-1228
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER