

2006 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A95000000860

FILED
Apr 20, 2006
Secretary of State

Entity Name: FAMILY HOLDINGS LIMITED PARTNERSHIP

Current Principal Place of Business:

C/O FAMILY GP CORP, INC./ATTN: K.P. FOSTER
333 FALKENBURG ROAD NORTH, SUITE B-206
TAMPA, FL 33619

New Principal Place of Business:

333 FALKENBURG ROAD N
UNIT B-206
TAMPA, FL 33619

Current Mailing Address:

C/O FAMILY GP CORP, INC./ATTN: K.P. FOSTER
333 FALKENBURG ROAD NORTH, SUITE B-206
TAMPA, FL 33619

New Mailing Address:

333 FALKENBURG ROAD N.
UNIT B-206
TAMPA, FL 33619

FEI Number: 59-3317855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, KENNETH P
333 FALKENBURG ROAD NORTH, SUITE B-206
TAMPA, FL 33619 US

Name and Address of New Registered Agent:

FOSTER, KENNETH P
333 FALKENBURG ROAD N
UNIT B-206
TAMPA, FL 33619 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

04/20/2006

Date

GENERAL PARTNER INFORMATION:

Document #: P95000043722
Name: FAMILY GP CORP, INC.
Address: 333 FALKENBURG ROAD NORTH, SUITE B-206
City-St-Zip: TAMPA, FL 33619

ADDRESS CHANGES ONLY:

Address: 333 FALKENBURG ROAD N, SUITE B-206
City-St-Zip: TAMPA, FL 33619

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: FAMILY GP CORP

GP

04/20/2006

Electronic Signature of Signing General Partner

Date