


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

**FILED
Mar 13, 2006 08:00 AM
Secretary of State**

DOCUMENT # A96000002473
1. Entity Name
THE BLAIR FAMILY LIMITED PARTNERSHIP



Principal Place of Business
606 BALD EAGLE DRIVE, STE. 500
MARCO ISLAND, FL 34145

Mailing Address
POST OFFICE BOX ONE
MARCO ISLAND, FL 34146



01092006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3446646	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WOODWARD, CRAIG R ESQUIRE
806 BALD EAGLE DR., STE. 500
MARCO ISLAND, FL 34145

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**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	BLAIR, WILLIAM C 1090 SO. COLLIER BLVD., #414 MARCO ISLAND, FL 34145
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	BLAIR, MAYFIELD L 1090 SO. COLLIER BLVD., #414 MARCO ISLAND, FL 34145
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03/22/06-80040-009 500.00

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IN THIS SPACE**

STAPLE CHECK HERE

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: *William C Blair* _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date: 3/13/06 _____
Date Day/line Phone #