


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

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 06 MAR 17 AM 10:22

**DOCUMENT # A98000000441**

1. Entity Name  
 MICHIGAN AVENUE PARTNERS, LTD.



Principal Place of Business  
 951 NORTH LAKE SYBELIA DRIVE  
 MAITLAND, FL 32751

Mailing Address  
 951 NORTH LAKE SYBELIA DRIVE  
 MAITLAND, FL 32751

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

Zip Country

01032006 Chg-LP CR2E003 (11/05)

4. FEI Number  
 59-3609077

Applied For  
 Not Applicable

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



6. Name and Address of Current Registered Agent

TATICH, PHILIP  
 341 NORTH MAITLAND AVENUE, SUITE 340  
 MAITLAND, FL 32751

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)  
 1151 N. Orange Ave.

City Winter Park FL Zip Code 32789

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 *Philip Tatch* DATE 3/10/06

**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 #                      | P98000015579                 | STREET ADDRESS           | 800069069708                |
| NAME                            | MAP/OPL, INC.                | CITY-ST-ZIP              | 03/30/06 01067 004 **500.00 |
| STREET ADDRESS                  | 951 NORTH LAKE SYBELIA DRIVE |                          |                             |
| CITY-ST-ZIP                     | MAITLAND, FL 32751           |                          |                             |
| DOCUMENT #                      |                              | STREET ADDRESS           |                             |
| NAME                            |                              | CITY-ST-ZIP              |                             |
| STREET ADDRESS                  |                              |                          |                             |
| CITY-ST-ZIP                     |                              |                          |                             |
| DOCUMENT #                      |                              | STREET ADDRESS           |                             |
| NAME                            |                              | CITY-ST-ZIP              |                             |
| STREET ADDRESS                  |                              |                          |                             |
| CITY-ST-ZIP                     |                              |                          |                             |
| DOCUMENT #                      |                              | STREET ADDRESS           |                             |
| NAME                            |                              | CITY-ST-ZIP              |                             |
| STREET ADDRESS                  |                              |                          |                             |
| CITY-ST-ZIP                     |                              |                          |                             |

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: *[Signature]* DATE 2/26/06 DAYTIME PHONE #