2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Jan 23, 2006 08:00 AM Secretary of State

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1. Entity Name
WEISS ASSET MANAGEMENT LIMITED PARTNERSHIP



Principal Place of Business

Mailing Address

3211 SOUTH OCEAN BLVD., #301 HIGHLAND BEACH, FL 33487 3211 SOUTH OCEAN BLVD., #301 HIGHLAND BEACH, FL 33487



DO NOT WRITE IN THIS SPACE

01112006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 65-0857135 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WEISS, STANLEY P 3211 SOUTH OCEAN BLVD., #301 HIGHLAND BEACH, FL 33487

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of changing its regions of registered agent.	gistered office or registered agent, or both, in the State of Florida. I am famillar with, and accept
SIGNATURE .	Signature, typed or primed name of registered agent and title if applicable	DATE
	FILE NOWIII FEE IS \$500.00 After May 1, 2006, Fee will be \$900.0	
		TY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. form; an amendment must be filed to change a general partner.
12.	GENERAL PARTNER INFORMATION	
DOCUMENT #	G05020900088	
NAME	LARRY S. WEISS REVOCABLE TRUST	
STREET ADDRESS	2391 HALBURTON	
CITY-ST-ZIP	BEACHWOOD, OH 44122	
DOCUMENT #		U8000039664 5
NAME	WEISS, MICHAEL B	01/30/06-8001 9-007 500. 0 0
STREET ADDRESS	1881 WESTLEIGH DR.	
CITY-ST-ZIP	GLENVIEW, IL 60025	
DOCUMENT #	G05020900087	
NAME	JANICE BROWN TRUST	
STREET ADDRESS	7351 N. KOSTNER AVENUE	DO NOT WRITE
CITY-ST-ZIP	LINCOLNWOOD, IL 60712	
DOCUMENT #		IN THIS SPACE
NAME	WEISS, SHELDON A	"

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 path; 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:

STREET ADDRESS

City-St-ZIP

DOCUMENT #

HAME
STREET ADDRESS
CITY-ST-ZIP
DOCUMENT /
NAME
STREET ADDRESS
CITY-SI-ZIP

STAPLE CHECK

5518 RIDGEMOOR COURT

ROCKFORD, IL 61107

FRUCEISS S. P. WE/55
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

01-17-06 (561)218-8302