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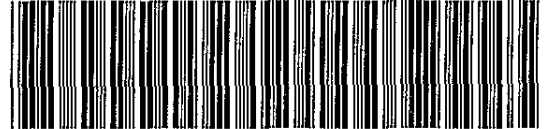
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TO: Registration Section
Division of Corporations

SUBJECT: MBS— Regents Place, Ltd.
(Name of Limited Partnership)

The enclosed Supplemental Affidavit and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael B. Smuck
(Name of Person)

MBS management Services, Inc.
(Firm/Company)

One Galleria Blvd., Suite 1950
(Address)

Metairie, LA 70001
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Michael B. Smuck
(Name of Person)

at (504) 836-5075
(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP**

The undersigned general partners of

MBS- Regents Place, Ltd., a
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes.

The total amount of the capital contributions of the limited partners is: \$ 1,234,390.

This 09 day of November, 2005.

FURTHER AFFLIANT SAYETH NOT.

*Under penalties of perjury, I declare that I have read the foregoing and that the facts are true, to the
best of my knowledge and belief.*

General Partner(s)

 Michael B. Smuck

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TALLAHASSEE, FLORIDA

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Fees:

\$7 per \$1000, based on additional
contributions
Minimum \$ 52.50
Maximum \$1750.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314