


**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005**

**FILED
Jan 21, 2005 08:00 AM
Secretary of State**

DOCUMENT # A98000002666	
1. Entity Name MT FAMILY SUBPARTNERSHIP, LTD.	

Principal Place of Business C/O MARTIN W. TARPLIN 1177 KANE CONCOURSE, STE 201 BAY HARBOUR, FL 33154	Mailing Address C/O MARTIN W. TARPLIN 1177 KANE CONCOURSE, STE 201 BAY HARBOUR, FL 33154
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2. Principal Place of Business	3. Mailing Address
Suite, Apt #, etc.	Suite, Apt #, etc.
City & State	City & State
Zip	Country



01052005	Chg-LP	CR2E003 (10/03)
4. FEI Number 65-0879656	Applied For Not Applicable	
5. Certificate of Status Desired	<input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TAPLIN, MARTIN W 1177 KANE CONCOURSE, STE 201 BAY HARBOUR, FL 33154	Name
	Street Address (P.O. Box Number is Not Acceptable)
	City
	FL Zip Code

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 fee if applicable

9. Capital Contributions as Shown on record. \$100.00	10. Amount of Capital Contributions in FLORIDA to date.
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**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 #	P98000095891	STREET ADDRESS	
NAME	MT FAMILY CORPORATION	CITY-ST-ZIP	
STREET ADDRESS	1177 KANE CONCOURSE, STE 201		
CITY-ST-ZIP	BAY HARBOUR, FL 33154		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			
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STREET ADDRESS			
CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Martin W. Taplin DATE: 1/12/2005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE

MARTIN W. TAPLIN