

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # B00000000095

1. Entity Name
J & C FOX FAMILY PARTNERSHIP, L.P.



Principal Place of Business
**4220 N.E. 25TH AVE.
FT. LAUDERDALE, FL 33308-5707**

Mailing Address
**4220 N.E. 25TH AVE.
FT. LAUDERDALE, FL 33308-5707**



01152006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0953915	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**FOX, JOEL S
4220 N.E. 25TH AVE.
FT. LAUDERDALE, FL 33308-5707**

**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

Signature, typed or printed name of registered agent and title if applicable

DATE

**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 #	F00000001801
NAME	J & C FOX FAMILY CORP.
STREET ADDRESS	4220 N.E. 25TH AVE.
CITY-ST-ZIP	FT. LAUDERDALE, FL 333085707

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02/24/06-80014-001 500.00**

**DO NOT WRITE
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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: Camille Fox LeCompte Ltd
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/8/06 954565-0497
Date Daytime Phone #

STAPLE CHECK HERE