


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

SECRETARY OF STATE
 DIVISION OF REVENUE
 06 FEB 20 AM 10:44

DOCUMENT # B05000000152	
1. Entity Name MBP FAMILY LIMITED PARTNERSHIP, LP	

Principal Place of Business 1308 DELAWARE AVENUE WILMINGTON, DE 19806	Mailing Address 2501 N. FLAGLER DRIVE WEST PALM BEACH, FL 33407
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



01252006 Chg-LP CR2E003 (11/05)

4. FEI Number	<input checked="" type="checkbox"/> 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
PATIPA, MICHAEL 2501 N. FLAGLER DRIVE WEST PALM BEACH, FL 33407

7. Name and Address of New Registered Agent
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 title if applicable.

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 #	F05000000367	STREET ADDRESS	
NAME	MBP FAMILY HOLDINGS, INC.	CITY-ST-ZIP	
STREET ADDRESS	2501 N. FLAGLER DRIVE		
CITY-ST-ZIP	WEST PALM BEACH, FL 33407		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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STREET ADDRESS			
CITY-ST-ZIP			

200066803992
 02/28/06 01022-008 **\$500.00

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: Michael Patipa Michael Patipa 2/5/06 561-8321449
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

STAPLE CHECK HERE