


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

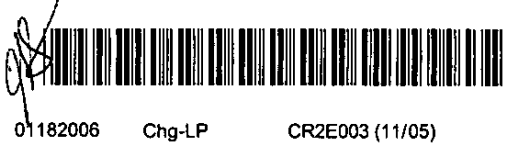
FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 06 FEB -2 AM 10: 34

DOCUMENT # B0500000488	
1. Entity Name MGI ST. JOHNS LIMITED PARTNERSHIP	

Principal Place of Business 5806 SOUTH RICE AVENUE HOUSTON, TX 77081	Mailing Address 5806 SOUTH RICE AVENUE HOUSTON, TX 77081
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2. Principal Place of Business 5606 South Rice Ave. Suite, Apt. #, etc.	3. Mailing Address 5606 South Rice Ave. Suite, Apt. #, etc.
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01182006 Chg-LP CR2E003 (11/05)



City & State Houston, Texas	City & State Houston, Texas	4. FEI Number 20-3706974	Applied For Not Applicable
Zip 77081	Country USA	Zip 77081	Country USA

6. Name and Address of Current Registered Agent WOOD, JON C 480 NORTH ORANGE AVENUE, C221 WINTER PARK, FL 32789		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 # NAME STREET ADDRESS CITY - ST - ZIP	M05000006237 MORGAN GROUP ST. JOHNS, L.L.C. 5606 SOUTH RICE AVENUE HOUSTON, TX 77081	STREET ADDRESS CITY - ST - ZIP	
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STAPLE CHECK HERE

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: Stanley D. Levy Stanley D. Levy 1-18-06 713.361.7200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #
 Vice President