

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 21, 2006 08:00 AM
Secretary of State

DOCUMENT # B98000000069

1. Entity Name
THE BREEN FAMILY LIMITED PARTNERSHIP



Principal Place of Business
**3524 FAIR OAKS LANE
LONGBOAT KEY, FL 34228**

Mailing Address
**3960 MERRICK RD.
SEAFORD, NY 11783**



02052006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2260831	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BREEN, JAMES J
3524 FAIR OAKS LANE
LONGBOAT KEY, FL 34228**

**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 _____ 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

DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	BREEN, JAMES J 3524 FAIR OAKS LANE LONGBOAT KEY, FL 34228
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	BREEN, JOAN F 3524 FAIR OAKS LANE LONGBOAT KEY, FL 34228
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03/04/06-80027-009 500.00

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IN THIS SPACE**

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: James J. Breen **JAMES J. BREEN** 2/9/06 941-387-3380
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #