


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

06 MAY 10 PM 3:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # P02000103710</b> 1. Entity Name <b>FIRST PARTNERS CORPORATION</b>	
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Principal Place of Business 2401 PGA BLVD SUITE 148 PALM BEACH GARDENS, FL 33410	Mailing Address 2401 PGA BLVD SUITE 148 PALM BEACH GARDENS, FL 33410
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

04112006 Chg-P CR2E034 (11/05)

4. FEI Number <b>55-0800722</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75</b> Additional Fee Required	

**6. Name and Address of Current Registered Agent**

MILLER, DONALD W ESQ  
2401 PGA BLVD  
SUITE 148  
PALM BEACH GARDENS, FL 33410

**7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)  
*3801 P.E.A. Blvd. Suite 806*

*Palm Beach Gardens, 33410*

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: *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
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**10. OFFICERS AND DIRECTORS**

TITLE	D <input checked="" type="checkbox"/> Delete	FRICKER, H. MAX
STREET ADDRESS		2401 PGA BLVD, STE 148
CITY-ST-ZIP		PALM BEACH GARDENS, FL 33410
TITLE	D <input type="checkbox"/> Delete	MILLER, DONALD W
STREET ADDRESS		2401 PGA BLVD, STE 148
CITY-ST-ZIP		PALM BEACH GARDENS, FL 33410
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	600073941266
STREET ADDRESS		05/04/06--01009--020 **268.75
CITY-ST-ZIP		
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	President
STREET ADDRESS		3801 PGA Blvd, Suite 806
CITY-ST-ZIP		Palm Beach Gardens, FL 33410
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* Date *4/15/06* Daytime Phone # *561-366-7000*