


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # A94000001851
 1. Entity Name
ATRIUM HALLANDALE SHOPPING CENTER, LTD.



Principal Place of Business Mailing Address
2525 HOLLYWOOD BOULEVARD **2525 HOLLYWOOD BOULEVARD**
HOLLYWOOD, FL 33020 **HOLLYWOOD, FL 33020**

DO NOT WRITE IN THIS SPACE



02222006 No Chg-LP CR2E003 (11/05)
 4. FEI Number Applied For
65-0543041 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
ATRIUM HALLANDALE SHOPPING CENTER, INC.
2525 HOLLYWOOD BOULEVARD
HOLLYWOOD, FL 33020

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 03/15/06-30068-011 500.00
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 #	P94000092869
NAME	ATRIUM HALLANDALE SHOPPING CENTER, INC.
STREET ADDRESS	2525 HOLLYWOOD BOULEVARD
CITY-ST-ZIP	HOLLYWOOD, FL 33020
DOCUMENT #	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

DO NOT WRITE 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: *[Signature]* as President 3-3006 927-6410 954
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #