

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A01000000073

1. Entity Name
HELLINGER PROPERTIES, LTD.



Principal Place of Business
1849 WYCLIFF DRIVE
ORLANDO, FL 32801

Mailing Address
1849 WYCLIFF DRIVE
ORLANDO, FL 32801

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip
32803

Country

Zip
32803

Country

04212006

Chg-LP

CR2E003 (11/05)

4. FEI Number
59-3694569

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHUFFIELD, W. CHARLES
SUITE 1700 GATEWAY CENTER
1000 LEGION PLACE
ORLANDO, FL 32801

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

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

13. ADDRESS CHANGES ONLY

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

HELLINGER MANAGEMENT, INC.
1849 WYCLIFF DRIVE
ORLANDO, FL 32801

STREET ADDRESS
 CITY-ST-ZIP

32803

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000074696950

05/17/06--01004--007 **500.00

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: Frank R. Hellinger FRANK R. HELLINGER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

25 APRIL, 2006 4078963204

Date

Daytime Phone #

FILED

06 MAY -1 PM 1:45

SECRETARY OF STATE
TALLAHASSEE FLORIDA

