

**2006 LIMITED PARTNERSHIP ANNUAL REPORT (AR)
DUE BY MAY 1, 2006**

FILED
Apr 24, 2006 08:00 AM
Secretary of State

DOCUMENT # A01000000126 1. Entity Name ADDISON PARK LIMITED PARTNERSHIP	
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Principal Place of Business C/O SENTINEL REAL ESTATE CORPORATION 1251 AVENUE OF THE AMERICAS NEW YORK NY 10020	Mailing Address C/O SENTINEL REAL ESTATE CORPORATION 1251 AVENUE OF THE AMERICAS NEW YORK NY 10020
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E003 (10/05)

4. FEI Number **58-2595688** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON FL 33331

7. Name and Address of New Registered Agent	
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

FILE NOW!!! Fee is \$500. * After May 1, 2006, fee will be \$900. *** Make check payable to Florida Department of State.**

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	P01000008090 ADDISON PARK APARTMENTS, INC. 1251 AVENUE OF THE AMERICAS NEW YORK NY 10020	STREET ADDRESS CITY-ST-ZIP	U00000532728 05/06/06-80097-005 500.00
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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: *Conrad J. Whitten* *Secretary, Addison Park Apartments, Inc* *4/17/06*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #