2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

DOCUMENT # A01000001650 JHP REAL ESTATE PARTNERSHIP, LTD. Principal Place of Business Mailing Address 9205 NORTH CONNECHUSETT ROAD 9205 NORTH CONNECHUSETT ROAD TAMPA, FL 33617 **TAMPA, FL 33617** 01182007 No Chg-LP DO NOT WRITE IN THIS SPACE Name and Address of Current Registered Agent -JHP MANAGEMENT, INC. 9205 NORTH CONNECHUSETT ROAD TAMPA, FL 33617 8. The above named entity submits this statement for the purpose of changing its registered office or rec the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00 GENERAL PARTNER INFORMATION P01000116665 DOCUMENT / JHP MANAGEMENT, INC. STREET ADDRESS 9205 NORTH CONNECHUSETT ROAD CITY-ST-ZIP TAMPA, FL 33617 DOCUMENT A NAME STREET ADDRESS

FILED Feb 02, 2007 08:00 Al **Secretary of State**



CR2E003 (12/06)

4. FEI Number Applied For 80-0043679 Not Applicable

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

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gistered agent, or both, in	the State of Florida.	I am familiar with,	ar	nd ac	ccept	
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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.

CITY-ST-ZIP DOCUMENT # NAME

*U000006192*42 02/08/07-80062-025

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14. I hereby certify that the information supplied with this filling 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:

STREET ADDRESS CITY-ST-ZIP

DOCUMENT 2 NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT /

STREET ADDRESS CITY-ST-7(P DOCUMENT 6 NAME STREET ADDRESS GITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

Daytime Phone #