2006 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2006

FILED Mar 22, 2006 08:00 A Secretary of State

DOCUMENT # A02000001588 1, Entity Name HD LR LTD, Principal Place of Business Mailing Address 2295 CORPORATE BLVD. N.W., #222 BOCA RATON, FL 33431 2295 CORPORATE BLVD. N.W., #222 BOCA RATON, FL 33431



DO NOT WRITE IN THIS SPACE

01182006 No Chg-LP CR2E003 (11/05)

4. FEI Number Applied For 76-0719890 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytime Phone #

5. Name and Address of Current Registered Agent

HERRICK, ELAYNE 2295 N.W. CORPORATE BLVD., STE. 222 BOCA RATON, FL 33431

STAPLE CHECK HERE

SIGNATURE:

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 Signature, typed or printied name of registered agent and title if applicable. DATE		
	FILE NOW!!! FEE IS \$500.00 After May 1, 2005, Fee will be \$900.	00 00000475560 04/06/06-80016-006 508.75
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 # NAME STREET ADDRESS CITY-ST-ZIP	P02000127114 G-P HD LR, INC. 2295 N.W. CORPORATE BLVD., STE, 222 BOCA RATON, FL 33431	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP		
DOCUMENT # NAME STREET ADDRESS CITY-SY-ZIP		
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		

TYPEO OR PRINTED NAME OF SIGNING GENERAL PART