


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 APR 24 AM 9:11

DOCUMENT # A05000000919			
1. Entity Name PORTSIDE-STUART, LLLP			
Principal Place of Business 1515 N. FEDERAL HIGHWAY, STE. 300 BOCA RATON, FL 33432		Mailing Address 1515 N. FEDERAL HIGHWAY, STE. 300 BOCA RATON, FL 33432	
2. Principal Place of Business 1515 S. Federal Highway Suite, Apt. #, etc. Suite 300 City & State Boca Raton, FL Zip 33432 Country USA		3. Mailing Address 1515 S. Federal Highway Suite, Apt. #, etc. Suite 300 City & State Boca Raton, FL Zip 33432 Country	
		02172006 Chg-LP CR2E003 (11/05)	
		4. FEI Number 20-4536130	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JEFFREY A. DEUTCH, P.A. 7777 GLADES ROAD, STE. 300 BOCA RATON, FL 33434		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>			
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	L05000001430 ALTMAN HARBORAGE COTTAGES GP, LLC 1515 N. FEDERAL HIGHWAY, STE. 300 BOCA RATON, FL 33432	STREET ADDRESS CITY-ST-ZIP	1515 S. Federal Highway, Suite 300 Boca Raton, FL 33432
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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: <u>BY: ALTMAN HARBORAGE COTTAGES GP, LLC, GENERAL PARTNER</u> <u>BY: THE ALTMAN COMPANIES, INC. SIGNATURE</u> 4/12/06			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER			

STAPLE CHECK HERE