


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By September 6, 2006

FILED
Jun 29, 2006 08:00 AM
Secretary of State

DOCUMENT # A06113 1. Entity Name AIRPARK PLAZA, LTD.		
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Principal Place of Business 703 WATERFORD WAY STE. 800 MIAMI, FL 33126	Mailing Address 703 WATERFORD WAY STE. 800 MIAMI, FL 33126
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
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Zip	Country	Zip	Country
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06232006 Chg-LP CR2E003 (11/05)

4. FEI Number 59-1782190	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PITTS, W. DOUGLAS 703 WATERFORD WAY STE. 800 MIAMI, FL 33126	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____
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FILE NOW!!! FEE IS \$500.00 Due by September 6, 2006

In accordance with s. 607.193(2)(b), F.S., the limited partnership did not receive the prior notice.

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 #	M34390	STREET ADDRESS	
NAME	LANCASTER DEVCORP, INC.	CITY - ST - ZIP	
STREET ADDRESS	703 WATERFORD AVE, STE. 800		
CITY - ST - ZIP	MIAMI, FL 33126		
DOCUMENT #		STREET ADDRESS	
NAME		CITY - ST - ZIP	
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CITY - ST - ZIP			

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 06/29/06 00001 002 500.00

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: 	Douglas H. Bridges 6/26/06	305-261-4330
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING GENERAL PARTNER		Daytime Phone #

STAPLE CHECK HERE