2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

FILED Feb 20, 2006 08:00 AM Secretary of State

Due By May 1, 2006				Secretary of State	
DOCUMENT #A11655				Secretar	y or State
1. Entity Name WHITEHALL BOCA, LTD.					
}	, <u>, , , , , , , , , , , , , , , , , , </u>				
, -	se of Business	Mailing Address	. ÷	1	
7300 DEL PRADO CIRCLE SOUTH 7300 DEL PRADO CIRCLE SOUTH BOCA RATON, FL 33433 80CA RATON, FL 33433				02/25/05/00/38/2	007 158.75
				1	HALL BERTH BERTH BERTHAM BY SERV
DO NOT WOITE IN TIME ODAGE				02082008 No Chg-LP GR2E	(003 (11/05)
DO NOT WRITE IN THIS SPACE				4. FEI Number 36-3152148	Applied For Not Applicate
}				5. Certificate of Status Desired	\$8.75 Additional
	6. Name and Address of Curr	ent Registered Agent		<u> </u>	Fee Required
PRENTICE-HALL CORPORATION SYSTEM, INC.				DO NOT WOIT	=
1201 HAYS ST. STE. #105			-	DO NOT WRIT	
TALLAHASSEE, FL 32301			{	IN THIS SPACE	=
			<u> </u>		· · · · · · · · · · · · · · · · · · ·
	named entity submits this statementions of registered agent.	it for the purpose of changing its	registered office or register	ed agent, or both, in the State of Florida. I am	i familiar with, and accep
SIGNATURE	Signature, typed of printed name of registered ex			DATE	
	FILE N	OWIII FEE IS \$500.00			
}	A GENERAL PARTNE	r that is a business en	TITY MUST BE REGIST	TERED AND ACTIVE WITH THIS OFFIC	
12.		MAY NOT de changed on th	ne form; an amendmen	it must be filed to change a general po	ittner.
DOCUMENT /	851256 WHITEHALL BOCA MGMT, C	^		The second secon	م المعلق الم المعلق المعلق
STREET ADDRESS	7300 DEL PRADO CIRCLE S.			الله الله الله الله الله الله الله الله	
DOCUMENT	BOCA RATON, FL			U0000044004	· r-
NAME	{		<u> </u>	<u> </u>	- -007 500.00
STREET ADDRESS CITY-ST-ZIP			-	:: - : : : : : : : : : : : : : : : : :	·
DOCUMENT!	·		· · ·		
NAME STREET ADDRESS			·	DO NOT WRITE	<u>.</u>
CITY-ST-ZIP			-11		
OOGUTAENT # NAME		• • •		IN THIS SPACE	-
STREET ADDRESS CITY-ST-ZIP				1 = •	- (f)
DOCUMENT /			-		· • .
NAME STREET ADDRESS			12 mm m		
CITY-ST-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 it made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empending the product this report as required by Chapter 620, Florida Statutes

SIGNATURE:

STAPLE CHECK HERE

DOCUMENT / NAME STREET ADDRESS CUTY-ST-ZHP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/15/06

Osylima Phone 4