


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Apr 14, 2006 08:00 AM
Secretary of State

DOCUMENT #A12503
 1. Entity Name
SUNBELT MANOR ASSOCIATES, A LIMITED PARTNERSHIP



Principal Place of Business Mailing Address
 8425 WOODFIELD CROSSING BLVD. P.O. BOX 40177
 #300W INDIANAPOLIS, IN 46240
 INDIANAPOLIS, IN 46240

DO NOT WRITE IN THIS SPACE



03242006 No Chg-LP CR2E003 (11/05)

4. FEI Number 59-2202771	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
 CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324

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 _____ DATE _____
Signature, typed or printed name of registered agent and this if applicable.

FILE NOW!!! FEE IS \$500.00
After May 1, 2006, Fee will be \$900.00

\$ 500.00

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	
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	GLICK, EUGENE B 215 WILLIAMS COURT INDIANAPOLIS, IN 46260
DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP	GLICK, MARILYN K 215 WILLIAMS COUT INDIANAPOLIS, IN 46260
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04/28/06-80028-020 500.00

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STAPLE CHECK HERE

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: *Eugene B. Glick* Eugene B. Glick 317-469-0400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #