

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 13, 2006 08:00 AM
Secretary of State

DOCUMENT # A23382

1. Entity Name
HAWTHORNE PROPERTIES, LTD.



Principal Place of Business

**3808 DOUNE WAY
CLERMONT, FL 34711**

Mailing Address

**3808 DOUNE WAY
CLERMONT, FL 34711**

DO NOT WRITE IN THIS SPACE



01042006 No Chg-LP

CRZE003 (11/05)

4. FEI Number

59-2721741

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HAWTHORNE, CHARLES
3808 DOUNE WAY
CLERMONT, FL 34711**

**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 printed name of registered agent and title if applicable

DATE

**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

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**HAWTHORNE, CHARLES E
3808 DOUNE WAY
CLERMONT, FL 34711**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP
**SHUMAN, BETTY H
PO BOX 961, 6 STARR ST
OAKLAND, FL 34760**

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY-ST-ZIP

1100000433063
02/23/06-80094-011 350.00

1100000433063
02/23/06-80094-012 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Charles E Hawthorne, Mgr / Partner
Charles E Hawthorne

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

1/16/06 352-341-0903

Date

Daytime Phone #

STAPLE CHECK HERE