## 2006 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2006

## DOCUMENT # A29402 06 FEB -2 AMII: 16 HINES INTERESTS LIMITED PARTNERSHIP Principal Place of Business Mailing Address 2800 POST OAK BLVD. 2800 POST OAK BLVD. **SUITE 5000** SUITE 5000 HOUSTON, TX 77056-6118 HOUSTON, TX 77056-6118 1092006 No Chg-LP CR2E003 (11/05) DO NOT WRITE IN THIS SPACE FEI Number Applied For 76-0293595 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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 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. GENERAL PARTNER INFORMATION 12. P34631 HINES HOLDINGS, INC. NAME 2800 POST OAK BLVD. STREET ADDRESS HOUSTON, TX 17056 **400065865944** 02/15/06--01005--026 \*\*500.00 NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT / NAME DO NOT WRITE STREET ADDRESS CITY-ST-ZIP IN THIS SPACE DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP OOCUMENT # STREET ADDRESS CITY-ST-ZIP DOCUMENT, /

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 verified. Secting of things like - GPOF things laterests

SIGNATURE: 56 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTN

STREET ADDRESS

\_\_\_\_

11 2-631- 8000

Daytime Phone #