

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Mar 22, 2006 08:00 AM
Secretary of State

DOCUMENT # A32373

1. Entity Name
AIRPORT TERMINAL ASSOCIATES, LTD.



Principal Place of Business
**2295 CORPORATE BOULEVARD, N.W.
SUITE 222
BOCA RATON, FL 33431**

Mailing Address
**2295 CORPORATE BOULEVARD, N.W.
SUITE 222
BOCA RATON, FL 33431**



01182006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0318195

Applied For
Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HERRICK, NORTON
2295 CORPORATE BOULEVARD NW
SUITE 222
BOCA RATON, FL 33431**

**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**

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04/06/06-80022-001 7122.50

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 # **V00955**
NAME **HC TERMINAL, INC.**
STREET ADDRESS **2295 CORPORATE BLVD., NW. STE. 222**
CITY-ST-ZIP **BOCA RATON, FL 33431**

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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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE