


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

**FILED
Mar 06, 2006 08:00 AM
Secretary of State**

DOCUMENT # A94000001852

1. Entity Name
ATRIUM HOLLYWOOD HOMES, LTD.



Principal Place of Business 2525 HOLLYWOOD BOULEVARD HOLLYWOOD, FL 33020	Mailing Address 2525 HOLLYWOOD BOULEVARD HOLLYWOOD, FL 33020
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DO NOT WRITE IN THIS SPACE

02232006 No Chg-LP

CR2E003 (11/05)

4. FEI Number
65-0543035

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ATRIUM HOLLYWOOD HOMES, INC.
2525 HOLLYWOOD BOULEVARD
HOLLYWOOD, FL 33020

**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.

1100010455623
03/15/06-80068-113 500.00

**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	P94000092835 ATRIUM HOLLYWOOD HOMES, INC. 2525 HOLLYWOOD BOULEVARD HOLLYWOOD, FL 33020
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IN THIS SPACE**

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: [Signature] as President 3-2-06 922-6410
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #