


**2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005**

**FILED
Jun 10, 2005 08:00 AM
Secretary of State**

DOCUMENT # A95000001841 1. Entity Name HOTEL VENTURE PARTNERS, LTD.		
Principal Place of Business 1950 STEMMONS FREEWAY, SUITE 6001 DALLAS, TX 75207		Mailing Address 1950 STEMMONS FREEWAY, SUITE 6001 DALLAS, TX 75207
2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	
Zip	Country	Zip Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		Name
		Street Address (P.O. Box Number is Not Acceptable)
		City
		FL Zip Code
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 _____
9. Capital Contributions as Shown on record, \$66,600,000.00		10. Amount of Capital Contributions in FLORIDA to date.
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		13. ADDRESS CHANGES ONLY
DOCUMENT #	F98000000191	STREET ADDRESS
NAME	PAH-HVP GENERAL PARTNER CORP.	CITY-ST-ZIP
STREET ADDRESS	1950 STEMMONS FREEWAY, SUITE 6001	
CITY-ST-ZIP	DALLAS, TX 75207	
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STREET ADDRESS		
CITY-ST-ZIP		
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>Michael Haja SVP/Treasurer</u>		Date: <u>4-29-05</u> Daytime Phone #: <u>214 863 1000</u>



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4. FEI Number 59-3352572 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

STAPLE CHECK HERE

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