2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Jan 17, 2006 08:00 AM
Secretary of State

DOCUMENT # A97000000774

1. Entity Name
MARY K. HELLER FAMILY PARTNERSHIP, LTD.

Principal Place of Business	Mailing Address
222 S. PENNSYLVANIA AVENUE SUITE 200 WINTER PARK, FL 32789	222 S. PENNSYLVANIA AVENUE SUITE 200 WINTER PARK, FL 32789

DO NOT WRITE IN THIS SPACE

01112006 No Chg-LP CR2E003 (11/05)

4. FEI Number
59-3440880
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

SALTSMAN, ROBERT P
222 S. PENNSYLVANIA AVENUE
SUITE 200
WINTER PARK, FL 32789

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 _____ DATE
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

000000389823
01/20/06-80061-021 500.00

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 #	P96000096580
NAME	RHH COMPANY
STREET ADDRESS	288 NINTH STREET
CITY-ST-ZIP	WINTER GARDEN, FL 34787
DOCUMENT #	P97000008125
NAME	L.H. KAMM, INC.
STREET ADDRESS	188 E. 70TH ST., #24-C
CITY-ST-ZIP	WASHINGTON, DC 20037
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
DOCUMENT #	
NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE 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: Mary Heller 1/9/06.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #