


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

Fla **Sec. of State**
FILED State
Apr 05, 2006 08:00 AM
Secretary of State

DOCUMENT # A97000002506

1. Entity Name
THE HESSEL FAMILY LIMITED PARTNERSHIP



Principal Place of Business
**13687 DEERING BAY DRIVE
 CORAL GABLES, FL 33158**

Mailing Address
**% GELBER & COMPANY
 11450 INTERCHANGE CIRCLE NORTH
 MIRAMAR, FL 33025**



2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

City & State

City & State

Zip

Country

Zip

Country

D1242006 Chg-LP CR2E003 (11/05)

4. FEI Number
65-0794078

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**HESSEL, FRANK J
 13687 DEERING BAY DRIVE
 CORAL GABLES, FL 33158**

7. Name and Address of New Registered Agent

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 _____

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.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #		STREET ADDRESS	
NAME	HESSEL, FRANK J	CITY-ST-ZIP	
STREET ADDRESS	13687 DEERING BAY DRIVE		
CITY-ST-ZIP	CORAL GABLES, FL 33158		
DOCUMENT #		STREET ADDRESS	
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 04/19/06-80098-010 500.00

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: *Frank J Hessel* **4/3/06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Day/Time Phone #

STAPLE CHECK HERE