

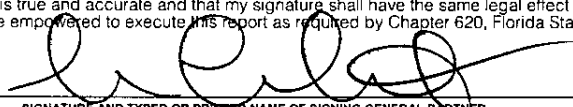


2006 LIMITED PARTNERSHIP ANNUAL REPORT

Due By May 1, 2006

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 FEB 20 AM 10:07

DOCUMENT # A97000002880 1. Entity Name HARBOUR ISLAND APARTMENT ASSOCIATES, LTD.					
Principal Place of Business 2600 E. COMMERCIAL BOULEVARD, SUITE 200 FORT LAUDERDALE, FL 33303				Mailing Address 2600 E. COMMERCIAL BOULEVARD, SUITE 200 FORT LAUDERDALE, FL 33303	
2. Principal Place of Business 5401 University Drive		3. Mailing Address 5401 University Drive			
Suite, Apt. #, etc. 103		Suite, Apt. #, etc. 103			
City & State Coral Sp FL		City & State Coral Sp FL		01252006 Chg-LP CR2E003 (11/05)	
Zip 33067		Country Broward		4. FEI Number 65-0801694	
Zip 33067		Country Broward		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JENNINGS & VALANCY 311 SE 13TH STREET FORT LAUDERDALE, FL 33316				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE _____	
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 #	572226		STREET ADDRESS	5401 University Drive #103	
NAME	M.S.L. PROPERTY MANAGEMENT, INC.		CITY-ST-ZIP	Coral Sp FL 33067	
STREET ADDRESS	2600 E COMMERCIAL BOULEVARD, #200		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE, FL 33308		CITY-ST-ZIP		
DOCUMENT #	P95000049362		STREET ADDRESS		
NAME	WESTON KENDALL CORP.		CITY-ST-ZIP		
STREET ADDRESS	7-11 SOUTH BROADWAY, SUITE #200		STREET ADDRESS		
CITY-ST-ZIP	WHITE PLAINS, NY 10601		CITY-ST-ZIP		
DOCUMENT #			STREET ADDRESS	500066794065	
NAME			CITY-ST-ZIP	02/28/06 01014-011 **508.75	
STREET ADDRESS			STREET ADDRESS		
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DOCUMENT #			STREET ADDRESS		
NAME			CITY-ST-ZIP		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: 			Date _____ Daytime Phone # _____		

STAPLE CHECK HERE