


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

06 MAY -7 PM 1:33

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # A98000002130 1. Entity Name NINETEEN HUNDRED BUILDING ASSOCIATES, LTD.	
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Principal Place of Business 1900 W COMMERCIAL BLVD, SUITE 200 FT. LAUDERDALE, FL 33309-3018	Mailing Address 1900 W COMMERCIAL BLVD, SUITE 200 FT. LAUDERDALE, FL 33309-3018
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



04182006 Chg-LP CR2E003 (11/05)

4. FEI Number 65-0882206	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent BOYLE, CONRAD J 500 EAST BROWARD BLVD., SUITE 1950 FT. LAUDERDALE, FL 33394	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 #	P98000068521	STREET ADDRESS	
NAME	KEENAN 1900, INC.	CITY-ST-ZIP	
STREET ADDRESS	1900 W COMMERCIAL BLVD, SUITE 200		
CITY-ST-ZIP	FT. LAUDERDALE, FL 333093018		
DOCUMENT #	P98000079537	STREET ADDRESS	1900 W. Commerical Blvd., Suite 175
NAME	KEISER 1900, INC.	CITY-ST-ZIP	
STREET ADDRESS	1500 N.W. 49TH STREET, SUITE 100		
CITY-ST-ZIP	FT. LAUDERDALE, FL 33309		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
STREET ADDRESS			
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NAME		CITY-ST-ZIP	
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

800074756458
 05/17/06--01019--017 **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: KEENAN 1900 INC AS G.P.
[Signature] april 10 2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE