


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED

06 MAY -1 PM 4:44

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # A98000002435		
1. Entity Name AZALEA PLACE APARTMENTS, LIMITED		

Principal Place of Business 50 HURT PLAZA, SUITE 300 ATLANTA, GA 30303	Mailing Address 8226 N WICKHAM RD SUITE 200 MELBOURNE, FL 32940
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2. Principal Place of Business	3. Mailing Address 2700 WYCLIFF RD.
Suite, Apt. #, etc.	Suite, Apt. #, etc. 312
City & State	City & State RALEIGH, NC
Zip	Zip 27607
Country	Country WAKE



04042006 Chg-LP CR2E003 (11/05)

4. FEI Number 65-0882803	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent TRANSOM DEVELOPMENT INC 8226 N WICKHAM RD SUITE 200 MELBOURNE, FL 32940	
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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 # NAME STREET ADDRESS CITY-ST-ZIP	M02000003517 CDC AZALEA GP, L.L.C. 8226 N WICKHAM RD, SUITE 200 MELBOURNE, FL 32940	STREET ADDRESS CITY-ST-ZIP	2700 WYCLIFF RD., SUITE 312 RALEIGH, NC 27607
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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.

BY: ALETA J. HODGES, V.P. of Mgr. of CDC AZALEA PLACE GP, LLC, GEN. PART, CDC AZALEA GP, LLC

SIGNATURE: Aleta J. Hodges 4-4-06 919-510-9660
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE