2005 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2005

DOCUMENT # A98000002870

1. Entity Name
HATTON HOUSE SENIOR HOUSING PARTNERS, LTD.

FILED
05 APR 29 PM 5:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
340 ROYAL POINCIANA PLAZA, SUITE 305 PALM BEACH, FL 33480	2001 W. BLUE HERON RIVIERA BEACH, FL 33401

03242005 Chg-LP CR2E003 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number: 59-3548587 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HAMLIN, CURTIS D 1205 MANATEE AVENUE WEST BRADENTON, FL 34205-7595	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.

9. Capital Contributions as Shown on record. $100.00

10. Amount of Capital Contributions in FLORIDA to date. 100.00

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 #	N96000003114	STREET ADDRESS	2001 W. Blue Heron Boulevard
NAME	THE PARTNERSHIP, INC.		
STREET ADDRESS	4016 BROADWAY	CITY-ST-ZIP	Riviera Beach, FL 33404
CITY-ST-ZIP	WEST PALM BEACH, FL 33407		
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STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does ~~not~~ qualify for the exemption stated in Section 119.07(3)(i), 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: John Colbett, President + CEO 4-26-05 (561) 841-3500 x1065
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #