

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

**FILED**  
**Apr 18, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # A99000001769**

1. Entity Name  
HP STAR II, LTD.



Principal Place of Business

777 SOUTH HARBOR ISLAND BLVD., STE 877  
TAMPA, FL 33602

Mailing Address

777 SOUTH HARBOR ISLAND BLVD., STE 877  
TAMPA, FL 33602

**DO NOT WRITE IN THIS SPACE**



03292006 No Chg-LP

CR2E003 (11/05)

4. FEI Number

59-3608495

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

HARROD, GARY W  
777 SOUTH HARBOUR ISLAND BLVD., STE 877  
TAMPA, FL 33602

**DO NOT WRITE  
IN THIS SPACE**

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

Signature typed or printed name of registered agent and the filer, if applicable.

4/10/06

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

DOCUMENT # L03000008068  
NAME HP TAMPA PARTNERS GP, LLC  
STREET ADDRESS 777 S. HARBOUR ISLAND BLVD, STE 877  
CITY-ST-ZIP TAMPA, FL

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DOCUMENT #  
NAME  
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CITY-ST-ZIP

U00000517878  
05/01/06-80065-003 500.00

**DO NOT WRITE  
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

4-10-06

Date

Daytime Phone #

STAPLE CHECK HERE