

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

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS

06 MAR -3 AM 9:50

|   |  |  |  |  |  |
|---|--|--|--|--|--|
| <b>DOCUMENT # A99000002091</b><br>1. Entity Name<br>HENDLER PARTNERS, LIMITED PARTNERSHIP   |  |  |  |  |  |
| Principal Place of Business<br>21493 LINWOOD COURT<br>BOCA RATON, FL 33438  |  | Mailing Address<br>21493 LINWOOD COURT<br>BOCA RATON, FL 33438 |  |  |  |
| 2. Principal Place of Business  |  | 3. Mailing Address   |  |  |  |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.  |  |  |  |
| City & State  |  | City & State   |  |  |  |
| Zip <u>33433</u>  | Country                                      | Zip <u>33433</u>   | Country  | 02172006    Chg-LP    CR2E003 (11/05)<br>4. FEI Number<br>22-3692393 |  |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required  |  |  |  | Applied For<br>Not Applicable  |  |
| 6. Name and Address of Current Registered Agent   |  |  | 7. Name and Address of New Registered Agent  |  |  |
| CORPORATION SERVICE COMPANY<br>1201 HAYS STREET<br>TALLAHASSEE, FL 32301-2525   |  |  | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>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 _____<br><small>Signature, typed or printed name of registered agent and title if applicable.</small>  |  |  |  |  |  |
| <b>FILE NOW!! FEE IS \$500.00</b><br><b>After May 1, 2006, Fee will be \$900.00</b>   |  |  |  |  |  |
| <b>A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.</b><br><b>NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.</b>   |  |  |  |  |  |
| 12. GENERAL PARTNER INFORMATION   |  |  | 13. ADDRESS CHANGES ONLY   |  |  |
| DOCUMENT #  | NAME   |  | STREET ADDRESS   |  |  |
| STREET ADDRESS  | HENDLER, ROBERT C                            |  | CITY-ST-ZIP  | BOCA RATON, FL 33433   |  |
| CITY-ST-ZIP   | 21493 LINWOOD COURT<br>BOCA RATON, FL 33438  |  | STREET ADDRESS   |  |  |
| DOCUMENT #  | NAME   |  | CITY-ST-ZIP  | BOCA RATON, FL 33433   |  |
| STREET ADDRESS  | HENDLER, AUTA P                              |  | STREET ADDRESS   |  |  |
| CITY-ST-ZIP   | 21493 LINWOOD COURT<br>BOCA RATON, FL 33438  |  | CITY-ST-ZIP  |  |  |
| DOCUMENT #  | NAME   |  | STREET ADDRESS   |  |  |
| STREET ADDRESS  | BERLAMINO, STEPHEN P                         |  | CITY-ST-ZIP  | 500068090525   |  |
| CITY-ST-ZIP   | 106 E. RIDGEWOOD AVENUE<br>PARAMUS, NJ 07652 |  | STREET ADDRESS   | 03/20/06--01012--005 **500.00  |  |
| DOCUMENT #  | NAME   |  | CITY-ST-ZIP  |  |  |
| STREET ADDRESS  |  |  | STREET ADDRESS   |  |  |
| CITY-ST-ZIP   |  |  | CITY-ST-ZIP  |  |  |
| DOCUMENT #  | NAME   |  | STREET ADDRESS   |  |  |
| STREET ADDRESS  |  |  | CITY-ST-ZIP  |  |  |
| CITY-ST-ZIP   |  |  | STREET ADDRESS   |  |  |
| DOCUMENT #  | 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: <u>R. P. Hendler</u> <u>Auta P. Hendler</u> 2/17/06<br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER    Date    Daytime Phone #</small>  |  |  |  |  |  |

STAPLE CHECK HERE

(561)  
 491-6935