


2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
06 MAY -1 AM 8:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # B02000000136 1. Entity Name BALDWIN PARK REALTY, L.P.	
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Principal Place of Business 1008 BENNETT ROAD ORLANDO, FL 32808	Mailing Address 200 WEST MADISON STREET, STE 3700 CHICAGO, IL 60606
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2. Principal Place of Business 4776 New Broad Street	3. Mailing Address 4776 New Broad Street
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Suite, Apt. #, etc. Suite 110	Suite, Apt. #, etc. Suite 110
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City & State Orlando, Florida	City & State Orlando, Florida
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Zip 32814	Country USA	Zip 32814	Country USA
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04132006 Chg-LP CR2E003 (11/05)

4. FEI Number 35-0541689	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	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 #	M02000001044	STREET ADDRESS	
NAME	BPARK REALTY GP, L.L.C.	CITY-ST-ZIP	
STREET ADDRESS	4776 NEW BROAD STREET, STE. 110		
CITY-ST-ZIP	ORLANDO, FL 328146423		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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000075019350
05/22/06--01021--014 **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: John Kevin Poorman Date: 4/12/06 Daytime Phone #: 312-873-4900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

John Kevin Poorman, Vice President

STAPLE CHECK HERE