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

## **FILED** Mar 01, 2006 08:00 AM **Secretary of State**

DOCUMENT	°#B950000004	145
----------	--------------	-----

1. Entity Name HEITMAN INSTITUTIONAL REALTY ADVISORS, L.P.



Principal Place of Business

191 N. WACKER DRIVE STE. 2500 CHICAGO, IL 60606

DOCUMENT # NAME STREET ADDRESS CSTY -ST - 21P DOCUMENT # MANA STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS DITY-57-200

Mailing Address

% GAIL CAREY, HEITMAN, IMB ADVISORY CORP. 191 N. WACKER DR., #2500 CHICAGO, IL 60606



## DO NOT WRITE IN THIS SPACE

01062006 No Chg-LP

CR2E003 (11/05)

4. FEI Number 36-3590452

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		DO NOT WRITE IN THIS SPACE	
	named entity submits this statement for the purpose of changing as regions of registered agent.  Signature, typed or printed name of registered agent and that if applicable	istered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 100000451396 03/11/06-80009-007-500.00	
	FILE NOWIL FEE IS \$500.00 After May 1, 2006, Fee will be \$900.00 A GENERAL PARTNER THAT IS A BUSINESS ENTIT	Y MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.	
12. Document I Name Street address City-St-Zip	GENERAL PARTNER INFORMATION  M99000000011  HEITMANIJMB INSTITUTIONAL REALTY ADVISORS 191 N. WACKER DR., STE. 2500  CHICAGO, IL 60606	lorm; an amendment must be filed to change a general partner.	
DOCUMENT   NAME STREET ADDRESS CITY-ST-ZIP			
Document ( Name Street Address City-St-Zip Bocument (		DO NOT WRITE IN THIS SPACE	

14. I hereby certify that the information supplied with this filling 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 it 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

Heitman Institutional Realty Advisors, LLC, General Partner

SIGNATURE: Z)m

TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER