

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

APPROVED
AND
FILED

06 MAY 15 AM 10:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PSK

DOCUMENT # B98000000695

1. Entity Name
HLC TAMPA PROPERTIES, L.P.



Principal Place of Business
7080 ABERCORN STREET
SAVANNAH, GA 31406

Mailing Address
P.O. BOX 13069
SAVANNAH, GA 31416



04272006 No Chg-LP

CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|-----------------------------|-------------------------------|
| 4. FEI Number 58-2427640 | Applied For Not Applicable |
|-----------------------------|-------------------------------|

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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 title if applicable.

400075656544
06/02/06--01011--001 **\$50.00
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 # | F98000006675 |
| NAME | HLC TAMPA PARTNERS, INC. |
| STREET ADDRESS | 7080 ABERCORN STREET |
| CITY-ST-ZIP | SAVANNAH, GA 31406 |

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| DOCUMENT # | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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**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]* *JP of General Partner*

4/26/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

STAPLE CHECK HERE